



Request for Domestic Partnership Registration

INSTRUCTIONS

Return completed form and payment to:

Clerk of the Circuit Court & Comptroller, Palm Beach County
205 N. Dixie Hwy, Room 4.2500
P.O. Box 4177
West Palm Beach, FL 33402

Phone: 561.355.6214
Fax: 561.355.2633
www.mypalmbeachclerk.com
COCREC93@mypalmbeachclerk.com

FEES

- Please fill out the quantity requested for the Number of Sets and Tax.
The cost for a set with Postage is \$6.85 (\$5.00 + \$0.35 + \$1.50).

	QTY	Cost	Total
Number of Sets		\$5.00	\$
Tax		\$0.35	\$
Postage			\$1.50
Total			\$

- Make Check Payable to: **Clerk of the Circuit Court & Comptroller**

REQUESTING PARTY NAME AND CONTACT INFORMATION

Requestor's name:		Date:	
E-mail address:		Phone Number:	
Mailing address:			
City:		State:	
		Zip:	

REQUEST FOR DOMESTIC PARTNERSHIP REGISTRATION WALLET CARDS OF THE FOLLOWING OFFICIAL RECORD DOCUMENT

DOCUMENT TYPE	CFN*	BOOK/PAGE*

*Please visit our website at www.mypalmbeachclerk.com, Official Records, to locate your documents.

Requestor's Signature:		Date:	
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Date Request Received by Recording SIA:	
Processed by Deputy Clerk:	