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**APPLICATION FOR CERTIFICATION OF CIVIL UNION RECORD**

Name of Partner A: \_\_\_\_\_

Name of Partner B: \_\_\_\_\_

Date of Civil Union: \_\_\_\_\_

Your Name: \_\_\_\_\_

Your Address: \_\_\_\_\_

Your Phone Number: \_\_\_\_\_

Your Relationship: \_\_\_\_\_

(Self, if Applicable)

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