

**COUNTY CLERKS**  
**STATE VITAL RECORDS OFFICE (SVRO) FORMS REQUISITION**

- Before you complete this order form, download or make a photocopy of this form for future use.
- Do not order more than a six-month supply.
- You may fax, email, or mail your order to the number or address listed below.

FORM NUMBER	FORM TITLE	CURRENT REVISION DATE	ORDER (Check appropriate box)
F-00125	Original Certificate of Termination of Domestic Partnership	03/14	Electronic only <input type="checkbox"/>
F-00128	Notice of Termination of Domestic Partnership	01/14	Electronic only <input type="checkbox"/>
F-00129	Affidavit of Notification of Intent to Terminate a Domestic Partnership	12/13	Electronic only <input type="checkbox"/>
F-05061	Marriage License Application	07/22	Electronic only <input type="checkbox"/>
F-05063	Consent of Parent(s) / Guardian(s) / Custodian(s) to Marriage of a Minor/Adult	05/15	Electronic only <input type="checkbox"/>
P-01060	Information for Marriage Applicants & Officiant	07/22	Electronic only <input type="checkbox"/>
County Clerk Vital Records Handbook for Marriage		07/22	Electronic only <input type="checkbox"/>
County Clerk Vital Records Handbook for Declaration and Termination of Domestic Partnership		11/13	Electronic only <input type="checkbox"/>

Telephone Number (including area code and extension) – Contact Person	
Name of Office including County Name	
Email Address	
Mail to: STATE VITAL RECORDS OFFICE - FORMS PO BOX 309 MADISON WI 53701-0309	Fax Number: 608-261-4971 Email: <a href="mailto:DHSVitalRecordsFormOrders@wi.gov">DHSVitalRecordsFormOrders@wi.gov</a> Telephone: 608-266-1939