

**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

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**Electing Partnership**

(15 Pa.C.S.)

- \_\_\_\_ Statement of Election (§ 8701A)
- \_\_\_\_ Statement of Amendment (§ 8701B)
- \_\_\_\_ Statement of Termination of Election (§ 8701C)

Name		
_____		
Address		
_____		
City	State	Zip Code
_____	_____	_____

**Document will be returned to the name and address you enter to the left.**



Fee: \$125 - Election  
\$70 – Amendment/Termination

In compliance with the requirements of the applicable provisions (relating to scope and definition) the undersigned partnership, desiring to elect or which has elected to be governed by 15 Pa.C.S. Ch.87 (relating to electing partnerships), and desiring to form/amend/terminate its statement of election, hereby states that:

1. The name of the partnership is:
_____

2. The location of its principal place of business is:				
_____				
Number and street	City	State	Zip	County

3. The name of each general partner of the partnership as of the date of this statement is:
_____
_____
_____
_____

4. *Check Boxes for Electing Partnership Only:*

The partnership elects to be governed by 15C.S. Ch.87 (relating to electing partnerships).

The election has been authorized by at least a majority in interest of the partners.

5. *Check Box for Statement of Amendment Only:*

The election to be governed by 15 Pa.C.S. Ch. 87 (relating to electing partnerships) is amended to reflect the information set forth in this statement in lieu of the information previously of record.

6. *Check Boxes for Statement of Termination Only:*

The election to be governed by 15 Pa.C.S. Ch. 87 (relating to electing partnerships) is hereby terminated.

The termination has been authorized by at least a majority in interest of the partners.

IN TESTIMONY WHEREOF, the undersigned partnership has caused this Statement of Election/Amendment/Termination of Election to be executed this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Name of Partnership

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title



**Department of State  
Corporation Bureau  
P.O. Box 8722  
Harrisburg, PA 17105-8722  
(717) 787-1057  
web site: [www.dos.state.pa.us/corps](http://www.dos.state.pa.us/corps)**

**Instructions for Completion of Form:**

- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for the Statement of Election is \$125. The filing fee for the Statement of Amendment or the Statement of Termination of Election is \$70 made payable to the Department of State.
- B. This form and all accompanying documents shall be mailed to the address stated above.