

Affidavit of Domestic Partnership

We, the undersigned, hereby declare under penalty of perjury that we are Domestic Partners as defined below, and we provide this affidavit for the purpose of verifying our status with respect to benefits eligibility.

Partner 1 Full Name:

Partner 2 Full Name:

Current Residential Address:

Length of Relationship (years):

Statement of Domestic Partnership:

Date:

Partner 1 Signature:

Partner 2 Signature:

Definition: Domestic partners are two adults who have chosen to share one another's lives in a committed intimate relationship of mutual caring, who live together, and who are jointly responsible for the necessities of life.

This affidavit is executed for the purpose of establishing eligibility for benefits and does not confer legal rights other than those described herein.