## AFFIDAVIT OF DOMESTIC PARTNERSHIP

## 

- 2. Both persons are eighteen (18) years of age or older, have the capacity to enter into a contract, and are currently unmarried.
- 3. The persons named above are not related by blood to a degree of closeness that would prohibit legal marriage in the State in which the partners legally reside.
- 4. The persons named above are involved in an exclusive, long-term, and committed relationship.
- 5. The persons named above have assumed mutual obligations for the welfare and support of each other, including financial obligations, health care expenses, and basic living expenses such as food and shelter.
- 6. The persons named above have been living together as a couple in the same household continuously for at least six months and intend to reside together indefinitely.
- 7. Neither of the persons named above has had a different partner less than six months before the date of this affidavit.
- 8. The persons named above are not currently involved in any other domestic partnership and have not been involved in any other domestic partnership or marriage for the last twelve (12) months unless that partnership or marriage ended because of death.

Dated: \_\_\_\_\_,20\_\_\_

Signature

Print or Type Name

Signature

Print or Type Name



State of	
County of	_
On	, before me,
	NAME, TITLE OF OFFICER
personally appeared	
	NAME(S) OF SIGNER(S)
□ personally known to me – O	PR □ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. Witness my hand and official seal.

SIGNATURE OF NOTARY

