

AFFIDAVIT OF DOMESTIC PARTNERSHIP

I DECLARE UNDER PENALTY OF PERJURY UNDER T STATEMENTS BELOW ARE TRUE AND CORRECT.	THE LAWS OF THE STATE OF CALIFORNIA THAT THE
	and
was declared on:	
	example: March 14, 2004)
2. The above named persons are not related to ea	
-	al obligations for the welfare and support of each other.
The above named persons have been living togotism months.	ether as a couple in the same household for at least
5. Neither of the above named persons has had a this affidavit.	different partner less than six months before the date of
6. Both persons are 18 (eighteen) years of age or o	older and currently unmarried.
Employee under Section 152 of the Internal Rev Partner and/or the dependent children of the D	of a Domestic Partner may not qualify as dependents of the venue Code, the value of coverage received by the Domestic Domestic Partner under the Employer's plan may be treated as f income tax withholding and employment taxes.
8. Non-employee Domestic Partner does not have Plan under federal or state law (e.g., COBRA).	e rights to continuing coverage through the Employer Health
9. The Employer is not required to grant an Emplo the Federal Family and Medical Leave Act.	yee family leave to care for his or her Domestic Partner under
Dated:	
Signature	Print or Type Name
Signature	Print or Type Name
State of	, County of
On before	NAME, TITLE OF OFFICER – E.G. "JANE DOE, NOTARY PUBLIC"
norconally appeared	
personally appeared	NAME(S) OF SIGNER(S)
	proved to me on the basis of satisfactory evidence to be in 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 which the person(s) acted, executed the instrument. Witness my hand and official seal.
	SIGNATURE OF NOTARY