AFFIDAVIT OF DOMESTIC PARTNERSHIP

STATE OF)
)ss.
COUNTY OF)

The undersigned, after being first duly cautioned and sworn, depose and declare as follows:

We are both eighteen years of age or older and are unmarried

We are not related by blood in a manner that would bar marriage under the laws of the State of New York

We have a close and committed personal relationship.

We have been living together on a continuous basis for at least twelve (12) months prior to the date of this affidavit and intend to do so indefinitely.

Neither of us has been married or had another domestic partner within the last twelve (12) months.

We are jointly responsible for our basic financial obligations.

Our Domestic Partnership began on or around : (date):_____

Witness (Print) Signature

Witness (Print) Signature

Sworn to before me this ____ day of _____, _____

Notary Public
My Commission Expires:_____