

**DECLARATION OF DOMESTIC PARTNERSHIP  
Dependent and Life Event Verification**

**I. DECLARATION:**

We, \_\_\_\_\_ and \_\_\_\_\_,  
(Associate print name) (Domestic Partner print name)

Each certify and declare that we are domestic partners in accordance with the following criteria:

**II. Status**

1. We acknowledge that our domestic partnership has been active for the past 12 months.
2. We acknowledge we have 30 days from the domestic partnership date to enroll in benefits.
  - a. *Example: domestic partnership **began** on 1/6/2023*
  - b. *Example: eligible date to enroll a domestic partner is 30 days from 1/6/2024*
3. We affirm that this domestic partnership **began** on \_\_/\_\_/\_\_.
4. We are each other's sole domestic partner, and we intend to remain so indefinitely.
5. Neither of us is married to or legally separated from anyone else nor had another domestic partner within the prior 12 months.
6. We are both at least eighteen (18) years of age or meet the age of consent in our state or residence; and mentally competent to contract.
7. We are not related by blood to a degree of closeness that would prohibit legal marriage in the state in which we legally reside.
8. We are engaged in a committed relationship of mutual caring and support and are jointly responsible for our common welfare and living expenses. Our interdependence is demonstrated by submitting at **least one of the following dated within the past 12 months** (please check appropriate item and submit proof of item checked with this form):

- Joint Utility Bill
- Joint Vehicle Registration
- Joint Mortgage or Lease Agreement
- Joint documents from the Bank Account or Financial Institution
- Driver's license listing common address (both associate and domestic partner must submit a copy of their driver's license)
- Proof partner is designated as the primary beneficiary for existing life insurance, retirement benefits or under a partner's will.
- Copy of presently valid Domestic Partnership Registration Certificate from any city, county or state offering the ability to register a domestic partnership.

9. We are not in this relationship solely for the purpose of obtaining benefits coverage.

