



AFFIDAVIT OF TERMINATION OF DOMESTIC PARTNERSHIP

I declare under penalty of perjury under the laws of the State of California that the statements below are true and correct. If a domestic partnership terminates, the subscriber must notify the employer by providing a signed notarized copy of this form within 30 days of termination.

That the partnership between:

_____ and _____
PRINT OR TYPE NAME (EMPLOYEE) PRINT OR TYPE NAME (DEPENDENT)

will terminate 6 months after the date of this notice.

Dated: _____, 20 _____,

_____ SIGNATURE (EMPLOYEE)	_____ PRINT OR TYPE NAME (EMPLOYEE)
_____ SIGNATURE (DEPENDENT)	_____ PRINT OR TYPE NAME (DEPENDENT)

Mailing Address	City	State	Zip

State of California County of _____	NOTARIZATION IS REQUIRED
On _____, before me, _____, Notary Public, personally appeared _____, who 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. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.	
WITNESS my hand and official seal.	
_____ Signature of Notary Public	[SEAL]