



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)

terminated on: _____, 20 ____ .

Dated: _____, 20 ____ ,

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

Mailing Address	City	State	Zip

State of California	NOTARIZATION IS REQUIRED
County of _____	
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]