

**STATEMENT OF TERMINATION OF
MARRIAGE/DOMESTIC PARTNERSHIP or
LEGAL SEPARATION/ANNULMENT OF MARRIAGE**

I, _____, affirm, under penalty of perjury, that the
(print name of employee)

Affidavit of Marriage/Domestic Partnership attested to and signed by me on

_____ is terminated as specified below:
date of affidavit

Name of spouse or domestic partner: _____

Termination of the Affidavit of Marriage/Domestic Partnership is due to:

- Dissolution of marriage (divorce) _____
(date final)
- Legal Separation/Annulment _____
(date recorded)
- Termination of domestic partnership _____
(date)
- Death of spouse/domestic partner _____
(date)
- Marriage to domestic partner _____
(date)

I shall mail a copy of this signed statement to my surviving former spouse/domestic partner.

signature

date