

# Statement of Termination of Domestic Partnership

**CONFIDENTIAL DELCARATION**

By signing this Affidavit of Termination of Domestic Partnership:

I, (employee): \_\_\_\_\_  
*First* *Middle* *Last*

affirm the termination of my  
 partnership with (Domestic Partner): \_\_\_\_\_  
*First* *Middle* *Last*

Effective date: \_\_\_\_\_

I additionally attest the following (*provide initials*):

Employee	I have provided a copy of this Statement of Termination of Domestic Partnership to my former domestic partner.
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I further acknowledge the following in regards to this Termination of Domestic Partnership filing (*provide initials*):

Employee	I understand that I will not be able to file a new Affidavit of Domestic Partnership until six (6) months after I have filed this Statement of Termination of Domestic Partnership with the Personnel Department's Employee Benefits Division.
	I further understand and acknowledge that the City is not obligated to provide any Domestic Partnership employee benefits to me under any ordinance or memorandum of understanding until six (6) months after I have filed this Statement of Termination of Domestic Partnership and a new validly executed Affidavit of Domestic Partnership has been filed with the Employee Benefits Division.

**SIGNATURE**

I declare, under penalty of perjury, that the foregoing is true and correct.

\_\_\_\_\_  
**Signature of Employee**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Printed name (Employee)**

\_\_\_\_\_  
**Employee ID or Social Security Number**  
(Employee ID# is located at the top portion of your payroll check, under your name)

\_\_\_\_\_  
**Employee Date of Birth**

\_\_\_\_\_  
**Daytime Phone Number**

\_\_\_\_\_  
**Email Address**

**Submit this completed form and documentation to:**

Online: Upload to your account at [keepingLAwell.com](http://keepingLAwell.com)  
Mail: Personnel Department  
 Employee Benefits Division  
 200 N. Spring Street, Room 867  
 Los Angeles, CA 90012.

Email: [per.EmpBenefits@lacity.org](mailto:per.EmpBenefits@lacity.org)  
Fax: 213-978-1623