

WILLAMETTE UNIVERSITY
Personal and Confidential
AFFIDAVIT OF MARRIAGE OR DOMESTIC PARTNERSHIP

SECTION I - Certification of Marriage or Domestic Partnership

I, _____ (name of undersigned Willamette University faculty or staff member) certify that (please complete "A" or "B"):

A. Marriage _____ (name of spouse) and I were legally married on _____ (date) Move to Section II
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B. Domestic Partnership _____ (name of domestic partner) and I are domestic partners as defined by Willamette University below: <ul style="list-style-type: none">• We share the same regular and permanent residence.• We share an ongoing, personal and committed relationship which we have with no other and which is comparable to marriage.• We either are not legally permitted to marry or choose not to marry for ethical or other significant personal reasons.• We are jointly responsible for each other's welfare and the maintenance of our household as demonstrated by several of the following: a written domestic partnership agreement; a joint real estate mortgage, lease or deed; current beneficiary designation naming the domestic partner as a primary beneficiary of life insurance, retirement plan or a will; joint ownership of a motor vehicle; joint checking and/or savings account; or a joint credit account.• Neither of us is married to anyone else.• Each of us is eighteen years of age or older.• We are not related by blood closer than would bar marriage in the state of Oregon.• We were mentally competent to consent to contract when our committed partnership began. <p><i>The fair market value of a benefit may be taxable. Please consult with your tax advisor before checking the appropriate box below:</i></p> <p><input type="checkbox"/> I certify that the previously named person is my legal tax dependent under IRS Sec. 152.</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> I certify that the previously named person is not my legal tax dependent under IRS Sec. 152.</p> Move to Section II

SECTION II - Understandings

We provide the information in this Affidavit to be used by Willamette University for the sole purpose of determining our eligibility for marital or domestic partnership benefits. We understand that we are subject to the other eligibility provisions of relevant benefit plans.

We understand that this Affidavit will be confidential and will be subject to disclosure (outside of persons whom the University determines to have a need to know for benefits, payroll, accounting, auditing, etc., purposes) only upon our express written authorization or if otherwise required by law.

We understand that a spouse or domestic partner is eligible for continuation of benefits upon termination of marriage or domestic partnership. For a spouse this continuation is available under the provisions of the Consolidated Omnibus Budget Reconciliation Act (COBRA). The university extends eligibility for continuation of benefits to a domestic partner according to the same parameters as the law requires for a spouse.

NOTICE: This affidavit of marriage or domestic partnership may have legal implications under Oregon state law. If you desire further information concerning the possible legal consequences of signing this form, please consult an attorney.

We have read and fully understand this Affidavit. We declare that the statements in this Affidavit are true and correct to the best of our knowledge.

Willamette University Faculty or Staff Member

Date

Spouse or Domestic Partner

Date

SECTION III - Changes in Status of Marriage or Domestic Partnership

I understand that this Affidavit shall be terminated upon the death of my spouse or domestic partner or by a change of the circumstances attested to in this Affidavit.

I agree to notify the Willamette University Human Resources Department if there is any change of the circumstances attested to in this Affidavit within thirty days of the change by filing a Statement of Termination of Marriage or Domestic Partnership and by providing a copy of the Statement to the spouse or domestic partner named in this Affidavit.

After such termination, I understand that another Affidavit of Marriage or Domestic Partnership cannot be filed until six months after a Statement of Termination of Marriage or Domestic Partnership has been filed with Willamette University Human Resources Department, unless such termination is due to my marriage to the person named herein as my domestic partner, the death of my spouse or domestic partner, or the dissolution of my marriage.

Willamette University Staff or Faculty Member

Date