

AFFIDAVIT OF COMMON LAW MARRIAGE

	of the City/Town	of			
State of	, do hereby under oath depose and say that:				
1. I know			and have known		
		For	years.		
2		Holds hir	mself/herself out in the		
Community to be	e the spouse of				
tate of					
ounty of	SS	<u>S.</u>			
Subscribed and swor	rn to before me this	day of			
20					
rint Name		(Notary Public)			
ignature	DATE	Signature	DATE		

HUMAN RESOURCES



AFFADAVIT OF COMMON LAW MARRIAGE

married, having first declared our marriage on or about (date)	1.	We		and		_ are		
(place)		married, having	first declared our marriage on	or about (date)		at		
No impediment to our marriage has existed at any time from and after our declaration of marriage by reason of either of us being married to any other person (whether in a common law or ceremonial marriage). 2. We share our marital home at (address)		(place)	S	and having	g, since that date, lived togeth	er as		
No impediment to our marriage has existed at any time from and after our declaration of marriage by reason of either of us being married to any other person (whether in a common law or ceremonial marriage). 2. We share our marital home at (address)		Husband and wife and observed the mutual rights and obligations of spouses in marriage.						
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3. We have, since our declaration of marriage, consistently held ourselves out as married for legal and social purposes, including for purposes of indicating marital status on state income tax returns, applications for insurance, wills, etc. 4. We understand that our marriage can be terminated only by the death of either of us, or by a court decree of annulment or divorce. 5. No court or government agency has issued a ruling finding that we have not been married at any time since the date of our declaration of marriage mentioned n paragraph 1. Under penalties of perjury, we certify that the foregoing representations are true, correct, and complete. (Common Law Spouse) STATE OF RHODE ISLAND COUNTY OF PROVIDENCE Before me this		marriage).						
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My Commission Expires:	Notar	y Public		<u> </u>				
171 COMMINUSION EMPROS.	My C	ommission Expire	es:					



AFFIDAVIT DECLARING CHILDREN OF COMMON LAW SPOUSES AS DEPENDENTS

support and that such	children are not eligible for a or intend to file, a joint Fe	any other health insurance coverage	that the following children of my elf and my common law spouse fo ge. I further affirm that my common declare, or intend to declare, these
Name		Date of Birth	
Under penalties of peroperties (Employee)	jury, we certify that the foreg	coing representations are true, corresponding to the control of th	
STATE OF RHODE IS COUNTY OF PROVI			
		, 20	, appeared and executed the ed his or her identify to me, and each
Notary Public			
My Commission Expir	res		

HUMAN RESOURCES



ACCEPTABLE DOCUMENTATION

You will need to provide at least two documents. At least one of these documents must verify your common household address for the last twelve (12) months. Please check which ones you are providing:

Documents showing joint mortgage or leases showing joint tenancy;
Cancelled rent checks (for last twelve (12) months) showing payments on a common household;
Documents verifying the designation of your common law spouse as the primary beneficiary on life and/or retirement contracts;
Documents showing joint ownership of a motor vehicle;
Documents verifying joint ownership of a motor vehicle;
Will establishing one another as beneficiary;
Documents showing execution of a durable power of attorney naming the common law spouse
Voter registration cards or voting records showing a common household
Please attach copies of two of the above documents and forward along with your completed affidavit of common law marriage.