

## Affidavit of Same Sex Domestic Partnership

I, \_\_\_\_\_, hereby certify that \_\_\_\_\_  
Faculty/Staff Member (Print) Domestic Partner (Print)

is my domestic partner and that:

1. We share a residence (unless residing in different cities, states, or countries on a temporary basis).  
We are in a long-term committed relationship and have been in this relationship for at least six (6) months.
2. We are of the same sex as each other and we are each other's sole domestic partner and intend to remain so indefinitely.
3. We are responsible for each other's common welfare.
4. We are at least eighteen (18) years of age or older.
5. We are not legally married to anyone.
6. We are not related by blood closer than would bar marriage in the State of Ohio.
7. We are mentally competent to consent to contract.
9. We share financial obligations, as demonstrated by the existence of at least two of the following conditions (please check those that apply):

\_\_\_\_\_ A. We have common or joint ownership of a residence (house, condominium, or mobile home).

\_\_\_\_\_ B. We share at least two of the following:

- (1) Joint ownership of a motor vehicle
- (2) Joint checking account
- (3) Joint credit account
- (4) Residential lease identifying both partners as tenants

\_\_\_\_\_ C. My domestic partner has been designated as a primary beneficiary of at least one of the following:

- (1) My Miami University Group Term Life Insurance
- (2) My will

NOTE: Documentation may be required to prove the existence of the above-mentioned conditions.

