



Domestic Partnership Affidavit

In the following affidavit, the words "I," "my," "we," "our," and "us" mean each and all of those who are subject to this affidavit as a result of signing the affidavit. The words "you" and "your" mean Los Angeles Police Federal Credit Union.

New Member Name: \_\_\_\_\_ (First, MI, Last) New Member Number: \_\_\_\_\_

- a. By signing this Affidavit of Domestic Partnership, we agree that we are in a committed and mutually exclusive relationship in which we are jointly responsible for each other's welfare and financial obligations.
b. We are not married to anyone else.
c. We are at least eighteen (18) years of age or older.
d. We are each other's sole domestic partner and intend to remain so indefinitely.
e. I, \_\_\_\_\_, agree to notify you within thirty (30) days of any change of circumstances attested to in this Affidavit by filing a Statement of Termination of Domestic Partnership with you.
f. We understand that if Los Angeles Police Federal Credit Union suffers any loss because of a false statement contained in this Affidavit, Los Angeles Police Federal Credit Union may bring a civil action against either or both of us to recover your losses, including reasonable attorney's fees and court costs.
g. We understand and agree that we are providing the information in this Affidavit solely to allow Los Angeles Police Federal Credit Union to determine our eligibility for services offered by Los Angeles Police Federal Credit Union.
h. We understand that in addition to the eligibility requirements of Los Angeles Police Federal Credit Union, there are terms and conditions of the Truth-in-Savings agreement and disclosure, other product agreements and disclosures, and loan agreements and disclosures, for the products and services offered by you.
i. We understand that the information we are providing in this Affidavit may be used either by you or by us as evidence of the existence of our domestic partnership in subsequent legal or administrative proceedings.
j. We each declare, under penalty of perjury, that the assertions in this Affidavit are true and correct to the best of each of our knowledge.
k. By signing below, we acknowledge receipt of our individual copies of this affidavit and acknowledge we have read and understand the total contents herein.

\_\_\_\_\_  
New Member Signature Date Domestic Partner Signature Date  
\_\_\_\_\_  
Domestic Partner Member Number