FPPA Fire & Police Pension Association of Colorado

Affidavit of Common Law Marriage

by death or divorce

on the date entered below

parties liable to repay benefits wrongly obtained

Questions about completing this form?

(303) 770-3772 in the Denver Metro area

(800) 332-3772 toll free nationwide Return completed form to:

FPPA

5290 DTC Parkway Suite 100 Greenwood Village, Colorado 80111-2721

Or FAX form to: (303) 771-7622

| MEMBER INFORMA | ATION | | | |
|---|-----------------------|--------------------------------|-----------------------------|-------------------------------------|
| MEMBER'S LAST NAME | | MEMBER'S FIRST NAMI | MEMBER'S FIRST NAME | |
| MAILING ADDRESS | | 1 | | APT# |
| CITY | | | STATE | ZIP |
| SS # (last 4 digits only) | EMAIL | | | |
| XXX-XX- | | | | |
| SPOUSE INFORMA | TION | | | |
| SPOUSE'S LAST NAME | | SPOUSE'S FIRST NAME | | SPOUSE'S MIDDLE INITIAL |
| MAILING ADDRESS | | | | APT# |
| CITY | | | STATE | ZIP |
| SS # (full 9 digits) | EMAIL | | | |
| | _ | ned, attest to the follow | _ | |
| | | lorado, as husband and wife | | |
| We hold ourselves being husband and | | y as husband and wife, cor | nsent to the marriage, c | ohabit and have the reputation as |
| • We are eighteen ye | ars of age or older | | | |
| • There is no legal im | pediment to our marri | iage, including, but not limit | ted to, a prior marriage tl | hat has not been legally terminated |

• We understand that our common law marriage can be terminated legally only through death or divorce • Executing this Affidavit may have other legal and financial consequences, please consult with an attorney

· Misrepresentation of marital status for purposes of obtaining benefits may be considered fraud and could make either or both

• FPPA may request additional verification of the information contained in this Affidavit. We certify that any and all information that we may present as evidence of our marriage is true and accurate and that any documents presented are authentic

• The information contained herein is true and complete to the best of our knowledge and that this agreement becomes effective

REQUIRED SIGNATURE & NOTARY

| Sign and date below in the presence of a notary public. | | | | | | |
|---|-------------------------|-----------------|-------------|--|--|--|
| | | | | | | |
| MEMBER'S FULL LEGAL SIGNAT | TURE | DATE | | | | |
| | | | | | | |
| SPOUSE'S FULL LEGAL SIGNATU | URE | DATE | | | | |
| | | | | | | |
| | | | | | | |
| For Notary Use Only | | | | | | |
| SUBSCRIBED AND SWORN TO ME | THIS DAY AND MONTH | OF THIS YEAR | NOTARY SEAL | | | |
| IN THE COUNTY OF | | IN THE STATE OF | | | | |
| WITNESS MY HAND AND OFFICIAL SEAL | NOTARY'S COMMISSION EXP | PIRES | | | | |
| NOTARY'S OFFICIAL SIGNATUR | E | | | | | |