

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

Affidavit of Common Law Marriage

MEMBER INFORMATION

MEMBER'S LAST NAME		MEMBER'S FIRST NAME		MEMBER'S MIDDLE INITIAL	
MAILING ADDRESS				APT #	
CITY			STATE		ZIP
SS # (last 4 digits only) XXX-XX-		EMAIL			

SPOUSE INFORMATION

SPOUSE'S LAST NAME		SPOUSE'S FIRST NAME		SPOUSE'S MIDDLE INITIAL	
MAILING ADDRESS				APT #	
CITY			STATE		ZIP
SS # (full 9 digits)		EMAIL			

Upon signing this form, the undersigned, attest to the following facts:

- We have lived together continuously in Colorado, as a married couple, from _____ to the present
- We hold ourselves out to the community as a married couple, consent to the marriage, cohabit and have the reputation as being a married couple.
- We are eighteen years of age or older
- There is no legal impediment to our marriage, including, but not limited to, a prior marriage that has not been legally terminated by death or divorce
- We understand 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 parties liable to repay benefits wrongly obtained
- FPPA may request additional verification of the information contained in this Affidavit. We certify any and all information we may present as evidence of our marriage is true and accurate, and any documents presented are authentic
- The information contained herein is true and complete to the best of our knowledge, and this agreement becomes effective on the date entered below

REQUIRED SIGNATURE & NOTARY

Sign and date below in the presence of a notary public.

MEMBER'S FULL LEGAL SIGNATURE

DATE

SPOUSE'S FULL LEGAL SIGNATURE

DATE

For Notary Use Only

SUBSCRIBED AND SWORN TO ME	THIS DAY AND MONTH	OF THIS YEAR
	IN THE COUNTY OF	IN THE STATE OF
WITNESS MY HAND AND OFFICIAL SEAL	NOTARY'S COMMISSION EXPIRES	
	NOTARY'S OFFICIAL SIGNATURE	

NOTARY SEAL