

Plaintiff,  
  
vs.  
  
Defendant.

**STIPULATION OF  
SETTLEMENT  
(DRL 255)**

Each of the parties sign and date (in the presence of a Notary Public) the following stipulation (which shall serve as an addendum if there is a prior stipulation), in conformance with Domestic Relations Law Section 255:

**The parties agree that each will be covered for future health coverage as follows:(state details)**

**-or-**

**The parties fully understand that upon the entrance of this divorce agreement, they will no longer be covered by the other party's health insurance plan and that each party shall be responsible for his or her own insurance coverage, and may be entitled to purchase health insurance on his or her own through a COBRA option, if available.**

Dated: \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
*Plaintiff's signature*

\_\_\_\_\_  
*Print name*

STATE OF NEW YORK )  
COUNTY OF \_\_\_\_\_ : SS.  
CITY OF \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ before me; the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
(NOTARY PUBLIC)

Dated: \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
*Defendant's signature*

\_\_\_\_\_  
*Print name*

STATE OF NEW YORK )  
COUNTY OF \_\_\_\_\_ : SS.  
CITY OF \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ before me; the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
(NOTARY PUBLIC)

