

Form 18

AFFIDAVIT OF WITNESS

I, _____, of the _____ (city/town, etc.) of _____
in the _____ (province/state, etc.) of _____ make oath and
say/herby affirm that:

1. I was personally present and did see _____, the person named in the
attached _____ (insert instrument type) sign that instrument at
the _____ (city/town, etc.) of _____ in the _____
(province/state, etc.) of _____.
2. I personally know the person whose signature I witnessed.

OR

The identity of the person whose signature I witnessed has been proven to me to my satisfaction.

3. The person whose signature I witnessed acknowledged to me that they
 - (a) are the person named in the attached instrument;
 - (b) have attained the age of majority; and
 - (c) were authorized to execute the instrument.

SWORN/AFFIRMED before me at the _____
of _____, in _____
this _____ day of _____, 20____.

_____ signature

_____ signature

Name, address and telephone number (required):

A Notary Public in and for the Province of Manitoba
or
A Commissioner for Oaths in and for the Province of Manitoba
My commission expires: _____
or
Other person authorized to take affidavits under *The Manitoba Evidence Act* (specify): _____