

Form 18

AFFIDAVIT OF WITNESS

I, _____ of
the _____ (city/town, etc.) of _____ in
the _____ (province/state, etc.) of _____

make oath and say/hereby affirm that:

1. I was personally present and did see _____, the person named in the attached _____ (insert instrument type-e.g.:Discharge) sign that instrument the _____ at _____ (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 _____ (city/town, etc.)
of _____, in _____ (province/state, etc.)
on this _____ day of _____, (Month) 20_____.

Signature of individual making oath/affirmation

Signature of Notary Public/Commissioner of Oaths or Other person
authorized to take affidavits under The Manitoba Evidence Act

(required):

Notary Public/Commissioner for Oaths or Other person authorized to take affidavits under The Manitoba Evidence Act (specify):

Name _____
Address _____

Telephone Number (XXX-XXX-XXXX) _____
My commission expires on (YYYY-MM-DD) _____



Place Stamp Here (If Applicable)