

CANADA)
)
PROVINCE OF ALBERTA)
)
TO WIT:)

AFFIDAVIT OF EXECUTION

I, _____ of the _____ of _____
(name of witness from front page) (city, town, village) (location)

in the Province of Alberta, MAKE OATH AND SAY:

1. THAT I was personally present and did see _____
(name of assignor from front page)
named in the within (or annexed) instrument duly sign, seal and execute the same for the purpose named therein.
2. THAT the same was executed at the _____ of _____
(city, town, village) (location)
in the _____, and that I am subscribing witness thereto.
(province, state, etc.)
3. THAT I know the said _____ and he is in my belief of the full age of eighteen years.
(name of assignor)

SWORN/AFFIRMED before me at)
)
the _____)
)
of _____)
)
in the Province of Alberta, this)
)
_____ day of _____)
)
_____)
)
year)
)
)
)
)

Witness's Signature

A Commissioner for Oaths/Notary
Public in and for the Province of Alberta

MY APPOINTMENT EXPIRES _____

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