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| **Clerk’s Stamp** |

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| COURT FILE NUMBER | Click or tap here to enter text. |  |
| *(File number, as on other court documents)* | |  |
| COURT | Provincial Court of Alberta | |
| JUDICIAL CENTRE | Click or tap here to enter text. | |
| *(City or town where court is located)* | | |
| APPLICANT | Click or tap here to enter text. | |
| *(Print your full name, as on other court documents)* | | |
| RESPONDENT | Click or tap here to enter text. | |
| *(Print the other party’s full name, as on other court documents)* | | |
| DOCUMENT: | Affidavit | |
| SWORN / AFFIRMED BY: | Click or tap here to enter text. | |
|  | (Name of person making this Affidavit) | |
| SWORN / AFFIRMED ON: | Click or tap to enter a date. | |
|  | (Date Affidavit sworn / affirmed) | |
| ADDRESS FOR SERVICE  AND CONTACT INFORMATION OF PARTY FILING THIS DOCUMENT | Click or tap here to enter text. | |
| (Name of party filing this document) | |
| Click or tap here to enter text. | |
| *(Full address of party filing this document)* | |
|  | ( ) | |

*(Phone number or email address if you wish to provide it)*

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|  | | I, | Click or tap here to enter text. | , of | Click or tap here to enter text. | , Alberta, |
|  | |  | (Your name) |  | (Name of City/Town) |  |
|  | **SWEAR / AFFIRM AND SAY THAT:** | | | | | |

1. I have personal knowledge of the following information, except where I say that what is stated is based on information from another person, in which case, I believe that information to be true.

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| **Sworn (OR Affirmed) before me** | | | | | |  |  | |
| at | Click or tap here to enter text. | |  | |  |  |  | |
| on | Click or tap to enter a date. | |  |  |  |  |  | |
|  | | | | |  | *(Signature of person swearing / affirming Affidavit)* | |
| Commissioner for Oaths in and for Alberta, Justice of the Peace or Notary Public  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Print Name and Expiry / Lawyer / Student-at-Law | | | | |  | ID Verified \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |