

Statutory Declaration by Disinterested Third Party

| 1 Please complete the declaration and have the witnessing official sign the declaration. | | | |
|--|-----------------|-----------------------------|---------------------------|
| l,(Dicinterected Third Party) | of | in th | e province of |
| I, of in the province of (City, town, village) | | | |
| | , country of | | do solemnly declare that: |
| | | | |
| I know the said | live | ed in a common-law relatior | nship with |
| (print name of empl | oyee) | | |
| fr | om, 19 _ | until the date of | 20 |
| (print name of common-law spouse) | | | |
| Preferred Method of Contact: | | | |
| Email | | Mail | |
| | | | |
| 2 Please complete the de | eclaration | 3 Please comple | ete the declaration |
| Declared before me at the City/Town | n/ | | |
| Village of in the provir | nce of | | |
| · | | Name of Third Party (ple | ase print) |
| Thisday of | 20 | | |
| | | | |
| | | | |
| Signature | | | |
| - | | Signature of Third Party | |
| State whether Notary Public/Justic | e of the Peace/ | - , | |
| Commissioner for Oaths. | | | |
| My appointment expires | · | | |
| | | | |