

# AFFIDAVIT

I, \_\_\_\_\_  
(name)

of \_\_\_\_\_  
(address)

make oath and say as follows:

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I make this affidavit in support of providing information required by \_\_\_\_\_  
\_\_\_\_\_ and for no other or improper purpose.

\_\_\_\_\_  
(signature)

Sworn by the said \_\_\_\_\_

before me, \_\_\_\_\_

in the City of Oshawa, Regional Municipality of Durham, in the Province of Ontario

on this \_\_\_\_ day of \_\_\_\_\_, 20

\_\_\_\_\_  
A commissioner, etc.