IN THE SUPREME COURT OF NEWFOUNDLAND AND LABRADOR
GENERAL DIVISION

In the Estate of _____ (name of mentally disabled person)

AFFIDAVIT

I, _____ (name of applicant) of

_____(city/town), in the Province of

_____ (province), make oath (or affirm) and say as follows:

1. That I have read and understand the foregoing Petition.

2. That I have personal knowledge of the facts contained therein and in the Inventory thereto annexed and they are true to the best of my knowledge, information and belief.

SWORN (OR AFFRIMED) at _____,
in the Province of _____
this___ day of _____ ,_____
before me:

_____ _____
Commissioner/Notary Public **Petitioner/applicant signature**