

Statutory Declaration by Disinterested Third Party

| | of | in the province of |
|---|-----------------------|---|
| I,(Disinterested Third Party) | (city, town, village) | in the province of |
| | , country of | do solemnly declare that: |
| I know the said(print name of employ | | eased I (print name of deceased common-law spouse |
| am aware that they lived in a commo | , on, 20 _ | from, 19 until the death of |
| 2 Please complete the dec | laration 3 | Please complete the declaration |
| Declared before me at the City/Town/ Village of in the province | | |
| Thisday of | | of Third Party (please print) |
| Signature | | ure of Third Party |
| State whether Notary Public/Justice | _ | , |
| Commissioner for Oaths. My appointment expires | | |