

FORM 18

(Family Services Act, S.N.B. 1980, c.F-2.2, s.76(7))

Court File Number.

IN THE COURT OF QUEEN'S BENCH OF NEW BRUNSWICK

FAMILY DIVISION

JUDICIAL DISTRICT OF

AFFIDAVIT OF WITNESS

I,, of,
(name in full) (address - street number, city, postal code)

MAKE OATH (or SOLEMN AFFIRMATION) AND SAY:

1. I was present and saw this consent signed by
(name in full)

at
(place)

2. I know the person consenting;

3. I am the person who signed as a witness to this consent.

Sworn to (or Solemnly affirmed))
)
before me at the)
)
of in the County)
)
of and Province of)
)
New Brunswick this day of)
)
., 20. . . .)
)
)
)
.)

A Commissioner of Oaths, Being a
Solicitor/My Commission Expires