AFFIDAVIT

(Made in accordance with Law Society Rule 18.04)

Note: This Affidavit is offered as a guide only. It is incumbent upon members to exercise their professional judgment to ensure they are compliant with the Law Society Rules.

I, _____, of _____, in the Province of Newfoundland and Labrador, a member of the Law Society of Newfoundland and Labrador, say as follows:

1. On the _____ day of _____, 20____, I did witness [name of signatory] sign the following documents via audio-visual technology:
    a) [specify document(s)]

    OR

    On the _____ day of _____, 20____, I did [notarize or commission] the following documents for [name of signatory] via audio-visual technology:
    a) [specify document(s)]

2. I do not believe that [name of signatory] has government-issued photo identification that is valid and current because:
    a) [specify reasons for belief]

3. [name of signatory] is known to me as follows:
    a) [specify the particulars of how you know the signatory, for example, length of relationship, reasons you were retained or approached, whether you have appeared for the person in court, etc.]

4. I believe [name of signatory] is who they claim to be because:

    a) [specify reasons – which may include reasons from 3 above]

5. This matter:

    a) does not involve the receiving, paying or transferring of funds as outlined in Rule 16.04;

    b) does not involve the witnessing of a will; and

    c) does not involve the witnessing, notarizing or commissioning of a document under the *Registration of Deeds Act, 2009*.

6. The particulars of this matter are as follows:

    a) [specify particulars of matter]

7. In addition to executing this Affidavit, I have complied with Law Society Rule [insert 16.06(6)(a)(ii) or 16.06(6)(a)(iii)].

8. I swear (or affirm) that the information contained in this Affidavit is true to the best of my knowledge, information and belief.

SWORN/AFFIRMED at

_____,

in the Province of Newfoundland

and Labrador, this _____ day

of _____, 20____

before me

_____   _____

                                                                   MEMBER