Services aux Autochtones Canada

PROTECTED **B** (when completed)

STATUTORY DECLARATION

(FAMILY MEMBER)

Canada	In the matter of the parentage	of
De de Grand		(Full name of child)
Province/Territory of	Born o	(Child's date of birth)
	,	·
		(City, Province)
To wit:		
l,	, of	
	(Full name) , of	(Street address)
of	(City/town, etc.)	erritory of
Do solemnly declare		
1. That I am the	of	
	(Family relationship to child)	(Full name of child)
who was born on	(Date of birth of child)	
	(Date of birth of child)	
2. I am registered und	der registration number	and my date of birth is
	(Registration number of	and my date of birth is family member)
(Date of birth	of family member)	
·		
3. The (Biological	of said child is	ull name of biological mother/father)
	·	•
whose registration nur	mber is and d (Registration number of parent)	(Date of birth is
l maka this salamn Daa		
as if made under oath,	laration conscientiously believing it to be true, and k and by virtue of the Canada Evidence Act.	nowing that it is of the same force and effect
Signature of Declara	nt	
X		
^		
Declared before me		
At the of	of of (Name of city/town, etc.)	in the Province/Territory of
(City/to	own, etc.) (Name of city/town, etc.)	
· · · · · · · · · · · · · · · · · · ·	this day of	, 20
Must be witnessed by a p Oaths such as a lawyer, r authorized under s.108 of	person authorized as a Commissioner for the Taking of notary public, justice of the peace or an ISC official f the Indian Act.	Witness' stamp giving title and authorization
Signature of Witness		
x		
^		