

AFFIDAVIT

C A N A D A)
PROVINCE OF Ontario)
TO WIT:)

I, Name of Address, **MAKE OATH AND SAY:**

1. My full legal name as it appears on my {{Type of Document}}, {{Document Number}}, is (Full Legal Name).
2. My date of birth is {{Date}}.
3. My name on my {{Type of Document}}, {{Document Number}}, is (Name). [NOTE: if your name is spelled differently on multiple documents, copy this sentence for each document]
4. The reason for the difference in my legal name on my {{Type of Document}} and my name on {{Type of Document}} is {{Reason}}.
5. I confirm that {{Full Legal Name}} and {{Name}} all refer to me, and are one and the same person, and any documents submitted under these names belong to me.
6. This affidavit was executed for the purpose of attesting to the truth of the facts stated above and for whatever legal purpose it may serve.

SWORN / DECLARED BEFORE ME AT:

City/Town of _____
in the Province/State of _____
on the _____ of _____, 20_____

A Commissioner of Oaths / Notary Public
in and for the Province of Ontario

Signature of Deponent