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|  |       |
|  | Court File No. |
| ONTARIO |
| SUPERIOR COURT OF JUSTICE |
| IN THE MATTER OF THE ESTATE OF |       | , deceased. |
| **AFFIDAVIT** |
| I, |       | of the |       | of |
|  | (insert full name) |  | (City, Town, etc.) |  |
|       | , in the Province of |       | , |
| (county, regional municipality, etc.) |  |  |  |
| MAKE OATH AND SAY (or AFFIRM): |
| 1. | I am an estate trustee for the above-noted estate. A Certificate of Appointment of Estate Trustee  |
|  | has been issued under court file number |       | . |
| 2. | When the Application for a Certificate of Appointment of Estate Trustee was filed with the court it  |
|  | indicated that the total value of the assets in the estate was $ |       | . |
| 3. | I have now determined that the revised total value of the assets in the estate is $ |       | . |
| 4. | The reason for this difference is *(specify reason for change)* |
|  |       |
| Sworn (or Affirmed) before me at the *(City, Town,* *etc.)*  |  |  |
|       | of |       |  |  |
| in the *(County, Regional Municipality,* *etc.)* |       |  |  |
| of |       |  |  |
| on *(date)* |       |  | Signature |
|  |  |  |
| Commissioner for Taking Affidavits (or as may be) |  |  |

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|  |  | Court File No. |   |
|  |  | **SUPERIOR COURT OF JUSTICE** |
| at |       |
| **IN THE ESTATE OF** |
|  , deceased |
| **AFFIDAVIT** |
|  | Name, address, telephone number and fax number of lawyer or applicant |
|       |