ONTARIO

Superior Court of Justice

Affidavit

Form 15B Ont. Reg. No.: 258/98

	Small Claims Court	Claim No.
	Address	
BETWEEN	Phone number	
		Plaintiff(s)/Creditor(s)
	and	
		Defendant(s)/Debtor(s)
My name is		
-	(Full name)	
I live in		
	(Municipality & province)	
I make this affidavit in rel	ation to:	
	(Specify why the affid	avit is being filed with the court.)

and I swear/affirm that the following is true:

Set out the facts in numbered paragraphs. If you learned a fact from someone else, you must give that person's name and state that you believe that fact to be true.

Les formules des tribunaux sont affichées en anglais et en français sur le site www.ontariocourtforms.on.ca. Visitez ce site pour des renseignements sur des formats accessibles.

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	Claim No.
If more space is required, attach and initial extra pages.	
Sworn/Affirmed before me (select one):	
Complete if affidavit is being sworn or affirmed in person:	
at the of, in the (County, F	Regional Municipality, etc.)
of, on(date)	·
(date)	
Signature of Commissioner (or as may be) Signature of Dep	

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Claim	No.	

Use one of the following if affidavit is being sworn or affirmed by video conference:

Complete if deponent and commissioner are in	same city or town:		
by	at the		
(deponent's name)	(city, town, etc.)		
of	in the (County, Regional Municipality, etc.)		
	(County, Regional Municipality, etc.)		
of	, before me on		
	(date)		
in accordance with O. Reg. 431/20, Administeri	ng Oath or Declaration Remotely.		
Commissioner for Taking Affidavits (or as may	pe)		
	,		
0:20122	O'market of Danas and		
Signature of Commissioner (or as may be)	Signature of Deponent		
Complete if deponent and commissioner are no	ot in same city or town:		
by	at the		
(deponent's name)	(city, town, etc.)		
of	in the(County Regional Municipality etc.)		
	(County, Regional Municipality, etc.)		
of			
	(city, town, etc.)		
of	in the (County, Regional Municipality, etc.)		
of			
01	, on in accordance (date)		
with O. Reg. 431/20, Administering Oath or Dec	Plaration Remotely		
with <u>o. r.og. 40 1/20</u> , / turning out of both	naration remotory.		
Commissioner for Taking Affidavits (or as may	be)		
Signature of Commissioner (or as may be)	Signature of Deponent		
- J	- 0		

WARNING: IT IS AN OFFENCE UNDER THE *CRIMINAL CODE* TO KNOWINGLY SWEAR OR AFFIRM A FALSE AFFIDAVIT.