## AFFIDAVIT

(Common-Law with children)

Applicant's Name (please print)			Social Insurance Number	
Street Address		Apt #		
5		Postal Code		
MAKE THE FOI	LOWING ST.	ATEMENT:		
I solemnly declare	e that both my	spouse named		and I have been living
together in an unr	married relation	nship since		·
			Month/Ye	ear
We are the adopti	ive or natural p	arents of our chil	ld/children n	amed;
I make this solem	nn declaration	conscientiously		
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