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Part 1: Case File Information	
TLAB Case File Number(s)	Hearing Date (yyyy-mm-dd)

Part 2: Affidavit Filed on behalf of Party (Participant)	
Party (Participant) First Name	Party (Participant) Last Name

Part 3: Affidavit		
I, (Full Name)	Professional Affiliation or Position Title	
Of (municipality)		
Make (make oath) (solemnly affirm) and say as follows: (Number paragraphs and identify attachments)		
	(continued on page 2)	



## Part 3: Affidavit (Continued)

Make (make oath) (solemnly affirm) and say as follows: (Number paragraphs and identify attachments) (Continued from Page 1)

Sworn before me,	Affiant Signature		
at the of			
(City, Town, etc.) (Name of City, Town, etc.)			
in the of			
(County, Regional Municipality) (Name of County, Regional Municipality)			
this day of (Month) (Year)			
(Date) (Month) (Year)			
*A Commissioner, etc.			
*This form must be sworn before a Commissioner if the person submitting the form is not a solicitor. A Commissioner may			
be: Lawyer, Notary Public, Justice of the Peace, Local municipal/town Clerk, Deputy Clerk, Treasurer, and others			
appointed by Lieutenant Governor to administer oaths or to take affidavits. An original is to be retained and may be			
required to be produced from the Party (Participant) on whose behalf this affidavit is filed.			