AFFIDAVIT VERIFYING CLAIM

Section 34(6) of the Act (Form 8)

Name of lienholder	
in the Province of	
ocupation	
named in the above (or annexed) statement make oath and say that the said claim is true.	
SWORN BEFORE ME at the	
in the Province of	
this day of	
Lienholder	Signature
A Commissioner for Oaths	Signature