FORM 11

Instructions: this form is to be sworn by one of the witnesses who attested to the will of the deceased.

IN THE NUNAVUT COURT OF JUSTICE

IN THE ESTATE OF _____, deceased.

(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)

AFFIDAVIT OF EXECUTION OF WILL OR CODICIL

I,		, of the	of		, in Nunavut,	
, (state your occupation), MAKE OATH AND SAY THAT:						
	1. I knew	(name o	of the deceased), late of the	of		, in
	Nunavut, (state the deceased's occupation), deceased.					

<u>Instructions</u>: If the testator signed the will or codicil himself or herself, use paragraph 2A in your affidavit and delete paragraph 2B. If a third party signed the will or codicil on behalf of the testator at the testator's request, use paragraph 2B in your affidavit and delete paragraph 2A.

2A. On or about the _____ day of _____, ___, I was personally present and did see the paper writing, which is attached and marked as Exhibit "A" to my Affidavit, signed by the testator, as his (*or* her) last will (*or* "as a codicil to his or her last will"), by signing his (*or* her) name (*or* "by making his/her mark" *or as the case may be*), at the foot or end of the paper writing.

OR

2B. On or about the _____ day of _____, ___, I was personally present and did see the paper writing, which is attached and marked as Exhibit "A" to my Affidavit, signed by a third party for and on behalf of the testator at his (*or* her) request, as and for his (*or* her) last will (*or* "as a codicil to his or her last will"), by signing the name of the testator in the presence of the testator, who was physically unable to sign his (*or* her) name or make his (*or* her) mark.

3. At the time the will (or codicil) was executed, the testator had attained the age of 19 years and, in my opinion, the testator was of sound mind, memory and understanding.

4. The will (or codicil) was executed by the testator in the presence of myself and ______(fill in the name of the other witness), of the _______, in Nunavut, ______(fill in the occupation of the other witness), and that we were both present at the same time. After the will (or codicil) was executed, ______(fill in name of other witness) and I did, in the presence of the testator and of each other, attest and subscribe the will (or codicil) as witnesses.

<u>Instructions</u>: If the testator made his or her mark, was blind or did not fully understand the language in which the will or codicil was written, use paragraph 5 in your affidavit.

<u>Instructions</u>: If erasures or irregularities appear on the face of the will or codicil or if the date of execution was omitted, use paragraph 6 in your affidavit.

6. The paper writing that is attached as Exhibit "A" to my affidavit, bearing the date of ______, and purporting to be the last will (or "as a codicil to his or her last will") of the deceased, has been examined by me and I have particularly observed _______ (here, please state the various alterations, erasures and interlineations, if any, and the general plight and condition of the will or codicil, or any other matter, that must be accounted for), and I say that the will (or codicil) is now in all respects in the same condition as when it was signed by the deceased and the witnesses (or explain the differences if there are any).

SWORN BEFORE ME at

500	ICIN DEI ORE MIE 6	11
		, in Nunavut,
	(community)	
on		_, 20
	(month, day)	

A Commissioner for Oaths in and for Nunavut* My commission expires: _____ Print name: _____ Signature of person swearing affidavit

*If this document is sworn outside Nunavut, it must be sworn by a Notary Public.