

# AFFIDAVIT OF SERVICE OF NOTICE OF OPPORTUNITY TO PROVIDE INFORMATION

In the matter of ??? (Name of Child Abuse Committee)

and

??? (Name of Alleged Abuser)

I, ???, in the province of Manitoba, ???, (occupation) do hereby make oath and say (solemnly affirm) as follows:

***(personal service)***

On ???, (date) at ???, (time) I gave ??? (identify person) *Notice of Opportunity to Provide Information (Form CA-1)* by leaving a copy with him (or her) at ???. (address where notice was left)

I was able to identify the person by means of ???. (state means by which the person's identity was ascertained)

***(service by mail)***

On ???, (date) I sent to ??? (identify person) by certified mail a copy of *Notice of Opportunity to Provide Information (Form CA-1)*.

On ???, (date) I received the acknowledgement of receipt card bearing a signature which purports to be the signature of ???. (identify person)

***(service by leaving a copy with an adult person in the same household)***

I gave ??? (identify person) *Notice of Opportunity to Provide Information (Form CA-1)* by leaving a copy on ???, (date) at ???, (time) with a person, ???, (insert name if known) who appeared to be an adult member of the same household in which ??? (identify person) is residing, at ???, (address) and by sending a copy by prepaid first class mail on ??? (date) to ??? (identify person) at the same address.

I ascertained that the person was an adult member of the person's household by means of

???

(state how it was ascertained that the person was an adult member of the person's household)

Before giving the documents in this way, I made an unsuccessful attempt to give ??? (identify person) the Notice personally at the same address on ???. (date)

[If more than one attempt has been made, add: and again on ???. (date)

THAT I make this affidavit conscientiously believing it to be true.

SWORN (AFFIRMED) before me )

at the \_\_\_\_\_ of \_\_\_\_\_ )

in the Province of Manitoba )

this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ . )

\_\_\_\_\_  
Signature

\_\_\_\_\_  
A Commissioner of Oaths in and  
for the Province of Manitoba  
My Commission expires \_\_\_\_\_