

Statutory Declaration – Spouse

Province of Saskatchewan

Claim# _____
Worker's Name: _____

To Wit:

I, _____ do solemnly declare:
(Fill in name in full)

- That I am the spouse of _____ who died on the ____ day of _____ as the result of personal injury sustained while in the employ of _____ at _____.
(Give city, town, or other place)
- That I was born on the ____ day of _____, _____. My S.I.N.# is _____
- That I was married to my above-named spouse on the ____ day of _____, _____, at _____.
(Give city, town, or other places)
- That at the date of my above-named spouse's death we were living together as husband and wife and had been so living continuously since our said marriage except

(If any exception, give particulars and explanation; if no exception, so state)

- That the names, dates of birth, and present residence of the children of the above-named spouse, under the age of 25, now living, wholly or partly dependent upon the worker's earnings at the time of death, are as follows:

Name	Date of Birth	Present Address
_____	____/____/____ (dd/mm/yyyy)	_____
_____	____/____/____ (dd/mm/yyyy)	_____
_____	____/____/____ (dd/mm/yyyy)	_____

- That I am now residing at _____
(Give street name and number, if any)
in _____, in the Province of _____
(Give city, town or other place)

- That I claim compensation on behalf of myself and the above-mentioned children.

And I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of "The Canada Evidence Act".

Declared before me at the _____ of _____ in the _____ of _____
this _____ day of _____ A. D. 20 _____.

A Commissioner, J. P., or Notary Public

(Spouse sign here)

