

**COURT OF APPEAL**

BETWEEN

\_\_\_\_\_

Appellant(s)/Respondent(s)  
(Plaintiff(s)/Petitioner(s))

AND

\_\_\_\_\_

Appellant(s)/Respondent(s)  
(Defendant(s)/Respondent(s))

**AFFIDAVIT OF SERVICE**

Fill in:

your name

occupation

address

Select one.

The name of the person or party served.

The date service took place.

The address or location service took place.

Identify the document that was served and attach a copy to the affidavit.

Do not sign until a commissioner for the taking of affidavits is present.

The commissioner for the taking of affidavits will witness your signature.

I, \_\_\_\_\_, (name)

\_\_\_\_\_, (occupation)

of \_\_\_\_\_, (address)

**Make oath and say that:**

**Solemnly affirm that:**

I served \_\_\_\_\_

on \_\_\_\_\_

at \_\_\_\_\_

with \_\_\_\_\_ (e.g. "a Notice of Appeal" or "a Notice of Application for Leave to Appeal")

\_\_\_\_\_, attached.

**Sworn/affirmed before me on**

\_\_\_\_\_ date

**at**

\_\_\_\_\_  
signature of person who served the document

\_\_\_\_\_  
location where affidavit is sworn

\_\_\_\_\_  
signature of commissioner for taking affidavits for British Columbia