

**AFFIDAVIT CONFIRMING ADULT INTERDEPENDENT  
PARTNER SURNAME**

I, \_\_\_\_\_ of \_\_\_\_\_

make oath and say:

I am the Adult Interdependent Partner of \_\_\_\_\_

who is the person named on the attached Affidavit Regarding A Name Change.

This Interdependent Relationship began on \_\_\_\_\_  
*(Give approximate date)*

SWORN before me at \_\_\_\_\_

in the Province of \_\_\_\_\_

this \_\_\_ day of \_\_\_\_\_ , \_\_\_\_\_

\_\_\_\_\_  
*(Signature of Adult Interdependent Partner)*

\_\_\_\_\_  
*A Commissioner, etc. (or as the case may be)*

\_\_\_\_\_  
*Print Name and Expiry Date of Commission*