FORM 74E

THE KING’S BENCH

                                     Centre

**AFFIDAVIT OF CONDITION**

IN THE ESTATE OF                                                                                                      , deceased.

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

*(city/town)*

hereby, MAKE OATH AND SAY:

1. That I am an executor named in the document attached hereto as Exhibit “A”, which purports

to be the last will of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(name of deceased)*

dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ who died on or about the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

*(date of will) (date of death)*

and was at the time of death habitually resident in Manitoba.

1. The will was located by me: *(set out details as to where and when the will was found)*

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1. The will is currently in all respects in the same state and condition as when I found it. At that

time, I observed the following: *(describe any unattested alterations, erasures, obliterations or interlineations in the will or describe any damage to the will)*

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1. I believe that the unattested alteration, erasure, obliteration or interlineation or the apparent

damage to the will was made:

before or at the time the will was executed by the deceased

after the will was executed by the deceased

before the will was revived by the deceased in accordance with clause 20(1)(a) of *The Wills Act*

before the execution of any codicil that forms part of the will marked as Exhibit “A.”

1. My belief, as stated above, is based on the following facts and information:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. I believe that the unattested alterations, erasures, obliterations or interlineations or the apparent damage to the will was made: *(provide any information explaining the reason for or circumstances of the alterations, erasures, obliterations or interlineations or the damage to the will and the facts and information on which that belief is based) (do not include this paragraph if the deponent has no information on this subject)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Sworn (or Affirmed) before me  in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , Manitoba  this \_\_\_ day of \_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_.  A Notary Public/Commissioner for Oaths in and for the Province of Manitoba.  My Commission expires:\_\_\_\_\_\_\_\_\_\_. |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Deponent |