**AFFIDAVIT**

IN THE COUNTY COURT **CI-\_\_\_-\_\_\_\_\_\_\_**

OF VICTORIA

AT

BETWEEN

|  |  |  |
| --- | --- | --- |
|  |  | **Plaintiff**  |
|  | and  |  |
|  |  | **Defendant** |

|  |  |
| --- | --- |
| Date of Document:  | Solicitors Code:  |
| Filed on behalf of:  | Telephone:  |
| Prepared by:  | DX:  |
|  | Ref:  |

I, of

make oath and state that:

Sworn by (*deponent*) at (*place*) )

in the State of Victoria this (*date*) )

day of (*month*) 20 )

Before me:

 (*name and address*)