STATUTORY DECLARATION

Ι	
	(Full name)
of	
-	(Address)

(Occupation)

Make the following statutory declaration under the Oaths and Affirmations Act 2018 (Vic):

(Signature of person making declaration)

I declare that the contents of this statutory declaration are true and correct and I make it knowing that making a statutory declaration that I know to be untrue is an offence.

Declared at [City, town or suburb]

*in the state of Victoria

On this date:

I am an authorised statutory declaration witness and I sign this document in the presence of the person making the declaration:

Before me:		On this date:	
	(Signature of authorised witness)		
		A person authorised under section 30(2) of the Oaths and Affirmations Act 2018 to witness the signing of a statutory declaration.	
		[Name, address and capacity in which the authorised person has authority to witness a statutory declaration]	