

Duty of Lawyer

(Complete only if Applicant or Respondent has a lawyer)

Court File Number

Family Law Act

BETWEEN

Name(s)

Applicant(s)

and

Name(s)

Respondent(s)

Court Stamp

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I, _____,

am the lawyer for the Applicant Respondent

and certify that I have complied with the requirements of s.5 of the *Family Law Act*.

My address for service is: _____

My phone number is: _____ My fax number is: _____

My file number is: _____

Dated on _____,

at _____, Alberta.

Signature