## MAGISTRATES COURT of WESTERN AUSTRALIA (CIVIL JURISDICTION) FORM 35 - AFFIDAVIT VERIFYING DISCLOSURE OF DOCUMENTS

Registry:			Case number:		
Claimant					
Defendant					
I, (full name)					
of (address):					
occupation:					
(* Select as applicable)					
having been duly sworn or affirmed say on oath or affirmation, the following:					
1. The statements made by me in paragraphs 2, 3 and 4 of the list of documents now produced and shown to me marked are true.					
2. The statements made by me in paragraph 5 of the said list are true to the best of my knowledge, information and belief.					
3. The obligations of disclosure have been fully explained to the * claimant/defendant or I understand the obligations of disclosure and the consequences of failure to disclose.					
4. I am not aware of any documents or objects that are directly relevant to the matters in dispute that have not already been disclosed by the * claimant/defendant.					
SWORN or AFFIRMED					
at					
this					
in the presence of					
Registrar/Justice of the Peace/other authorised witness Deponent					
Lodging party must complete all fields below including the address for service.  Lodged by Claimant or Claimants Lawyer					
Defendant or Defendants Lawyer  Other .					
Address for					
service Tal	ephone:	Lawyer's ref:	Fax:	E mail:	
Contact Tel details	ерноне.	Lawyer s rei:	r'ax.	в пап.	