

Declaration of Partnership

Partnership Act

We, _____
Name of Declarant

Name of Declarant

declare that:

1. We are carrying on or intend to carry on the business of

Type of Business

in _____, in the Province of Alberta, under the name
City, Town, Village

of _____
Business Name

2. The said partnership has existed since _____, and that the
Day / Month / Year

partnership will exist; (a) until _____
Day / Month / Year

(b) for an indefinite period.

3. The persons named in the declaration are the sole members of the partnership.

4. Date of declaration _____
Day / Month / Year

5. Name, Address, Occupation and Identification of Partners *(If more than two partners, please attach a list)*

Name: _____

Resident Address: _____
City, Town, Village Province Postal Code

Occupation: _____
Identification

Name: _____

Resident Address: _____
City, Town, Village Province Postal Code

Occupation: _____
Identification

This information is being collected for the purposes of corporate registry records in accordance with the Partnership Act. Questions about the collection of this information can be directed to the Freedom of Information and Protection of Privacy Coordinator for the Alberta Government, Box 3140, Edmonton, Alberta T5J 2G7, (780) 427-7013.