

Newfoundland Volunteer War Service Medal

Statutory Declaration - Form B

To be completed where application is made by relative of Veteran.

Province of Newfoundland and Labrador
To Wit

In The Matter of The Volunteer War Service
Medal Act and Regulations
and
In The Matter of the Application of

I,

(name in full)

of

in the Province/Territory of

or Country of

do solemnly declare that I am the surviving relative of

(name of Veteran)

eligible to be awarded a medal on his/her behalf pursuant to the above-mentioned Act and Regulations and to the **order of priority** set forth therein, namely:

Surviving Spouse

Eldest Surviving Child

Eldest Surviving Parent

Eldest Surviving
Brother or Sister

And I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

Declared before me at

, in the Province/Territory of

or Country of

this day of , 20 .

a Commissioner, etc.

Signature of Applicant

Privacy Notice

Under the authority of the **Volunteer War Service Medal Act**, personal information is collected for program requirements. This information is kept confidential and handled as required by the **Access to Information and Protection of Privacy Act**. Any questions or comments can be directed to the Manager of Protocol at 709.729.3670 or Protocol@gov.nl.ca.

