Form FL‑12  
 [Rule 12.24]

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| COURT FILE NUMBER  Clerk’s Stamp |  |
| COURT | COURT OF KING’S BENCH OF ALBERTA |
| JUDICIAL CENTRE |  |
| APPLICANT(S) |  |
| RESPONDENT(S) |  |
| DOCUMENT | **CERTIFICATE OF LAWYER** |

|  |  |
| --- | --- |
| ADDRESS FOR SERVICE AND  CONTACT INFORMATION OF  PARTY FILING THIS DOCUMENT |  |

[To be completed by a lawyer acting on behalf of the Applicant or the Respondent]

I,       lawyer for [name] (Applicant or Respondent) hereby certify that I have complied with the requirements of section 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 [date] at [city], Alberta.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature