

# Counselling Certificate

## Second Stage

**File Number:** \_\_\_\_\_

**To:** **Superintendent of Bankruptcy**

**From:** \_\_\_\_\_

**Re:** \_\_\_\_\_

**Date of Counselling:** \_\_\_\_\_

I, the undersigned, hereby certify that I have complied with the terms of Section 8 of the Counselling Directive.

Dated at the City of \_\_\_\_\_ in the Province of \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_

Counsellor

### Acknowledgement

I, the undersigned, have consulted with the above-named qualified counsellor and acknowledge receiving and understanding the counselling referred to in this certificate.

Dated at the City of \_\_\_\_\_ in the Province of \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_

Bankrupt