tiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and by virtue of the Canada Evidence Act.

 $\left. \begin{array}{ccccc} \text{Declared before me at the} & \text{of} \\ \text{in the} & \text{of} & \text{, this} \\ \text{day of} & \text{, 19} & . \\ & & A \ Commissioner, \ etc. \end{array} \right\}$

FORM No. 6.

Warrant to Medical Practitioner.

Province of Ontario, of fied medical practitioner of the of in the of .

By virtue of my office these are in His Majesty's name to charge and command you that you do (make or assist in making a post mortem examination of the body of , now lying dead at the of , in the County of , without an analysis, and) appear before me and my jury at , in the of , on the day of , 19 , at o'clock, and give further evidence touching the death of

Given under my hand and seal this day of , 19 . day

Coroner.

The words between the brackets () may be omitted when a *post mortem* examination is not required.