## NOTICE TO CREDITORS AND OTHERS

Please Print Clearly

		formerly of
	(Name)	, formerly of
	(Address)	
Deceased, who died	On(Date)	, are hereby required
to send the particular	rs thereof to the undersigned Executor, c/o	(Your Name)
(Your Mailin	g Address)	
on or before	be a minimum of 3 weeks from date of publications of the Gazette, which is printed	h date the estate's assets ed every Thursday)
will be distributed, h	naving regard only to the claims that have been	received.
(Your Name)	, Executor.	
	8.93 (\$42.39 plus GST). Company Cheques or Money Order I mailed to the address following. Note that we do not accept	
Please fax this form back	to 250 387-1120 or email to <a href="mailto:QPGazette@gov.bc.ca">QPGazette@gov.bc.ca</a> or mail	to the following address:
BC Gazette PO Box 9452 Stn Victoria BC V8W		
Your Name		
Phone Number(s)		
Mailing Address		
Visa or Mastercard	/Expiry	/
If you have any questions, @1 800 663-6105	, please do not hesitate to call the BC Gazette	