Form 1 Heading, Supreme Court (r.2.5)

IN THE SUPREME COURT OF

CIVIL CASE NO OF

THE REPUBLIC OF VANUATU

(CIVIL JURISDICTION)

BETWEEN

Claimant's name

Claimant's lawyer's name or Claimant's address

AND

Defendant's name

Defendant's lawyer's name or Defendant's address

(list any other parties, e.g. other defendants, third parties)

(TITLE OF DOCUMENT)

Form 2 Heading, Magistrates Court (r.2.5)

CIVIL CASE NO OF

IN THE MAGISTRATES COURT OF

THE REPUBLIC OF VANUATU

(CIVIL JURISDICTION)

BETWEEN

Claimant's name

Claimant's lawyer's name or Claimant's address

AND

Defendant's name

Defendant's lawyer's name or Defendant's address

(list any other parties, e.g. other defendants, third parties)

(TITLE OF DOCUMENT)

Form 3 Sworn Statement (r.2.5)

[HEADING AS IN FORM 1 or 2]

١,	of	, swear the following is true:
name of person making statement	address and occupation	<i></i> 0
1.		
2.		
3.		
SWORN by)))	
name of person making statement	signature of person making	statement
ON	-	
BEFORE ME		

SWORN STATEMENT

Signature of witness Commissioner for Oaths OR Notary Public

Form 4 Third Party Notice (r.3.7)

[HEADING AS IN FORM 1 or 2]

AND

Third Party's name

Third Party's lawyer's name or Third Party's address

Norse of third ports		
Name of third party		
Address of third party		
I,	of	
, Defendant's name		Defendant's address
claim		
details of contribution, indemnity or other	remedy claimed by defer	idant against third party
because		

Signature of defendant's lawyer, or defendant if defendant does not have a lawyer

Date of filing: ______ Filed by: ______

name and address of defendant's lawyer OR Defendant's name and address, if defendant does not have a lawyer

THIRD PARTY NOTICE

Form 5 Supreme Court Claim (r.4.3)

[HEADING AS IN FORM 1]

SUPREME COURT CLAIM

))))

)

Date of filing:	 	
Filed by:	 	
Address for		
Service		

name and address of Claimant's lawyer OR Claimant's name and address, if claimant does not have a lawyer

If for fixed amount	
The Claimant Claims:	
Interest:	
Filing and Service Fees:	
Total claimed	
	and costs

Set out details of claim in numbered paragraphs

1	
I	

2.

Signed by the Claimant OR Claimant's lawyer

at	
	Place
on	
	Date

Signature of claimant OR claimant's lawyer

IMPORTANT: TO (name of defendant) YOU MUST READ THIS CLAIM AND THE ATTACHED NOTES. YOU MAY WISH TO CONSULT A LAWYER. YOU MUST RETURN THE RESPONSE FORM TO THE COURT. YOU MUST TAKE ACTION QUICKLY.

COURT CLAIM

NOTES FOR DEFENDANTS

You have been served with a claim in legal proceedings. You are the defendant. This claim is made against you personally or as the representative of the defendant.

YOU MUST TAKE ACTION QUICKLY

1. Complete the attached RESPONSE form. Take or send one copy to the Court. Take or send one copy to the Claimant.

These copies must be actually with the Court and Claimant in 14 days from when you received the Claim.

2. If you have ticked box 2 or 3 on the Response form, you must file a DEFENCE form.

Set out in the Defence why you dispute part or all of the claim. Take or send one copy to the Court.

Take or send one copy to the Claimant.

These copies must be actually with the Court and Claimant in 28 days from when you received the claim.

3. If you have ticked box 4 on the Response form, you must file a Defence (see paragraph 2) and a COUNTERCLAIM. Set out in the Counterclaim what you are claiming against the claimant.

Take or send one copy to the Court.

Take or send one copy to the Claimant.

These copies must be actually with the Court and Claimant in 28 days from when you received the claim.

<u>WARNING:</u> If you do not take action as required then the claimant can sign judgment against you. This means the claimant will win the case. You can then only reopen the case on the Order of a Judge or Magistrate if you have good reason.

Form 6 Magistrates Court Claim (r.4.3)

[HEADING AS IN FORM 2]

MAGISTRATES COURT CLAIM

Date of Filed by Addres Service	y: s for	name and address of Claimant's lawyer OR Claimant's name and address, if claimant does not have a lawyer		If for fixed amour The Claimant Interest: Filing and Se Total claimed	Claims:	s: and costs
DATE C)F FIRS	T HEARING	ΥΟυ Μυ	ST ATTEND C	OURT O	N THIS DATE
Set out detail	ls of claim in	numbered paragraphs				
1.						
2.						
at on	Place Date	Claimant OR Claimant's lawyer)))	Signature of claimant (DR claimant's la	awyer

[WARNING NOTICE AS IN FORM 5]

Form 7 Response (r.4.4)

[HEADING AS IN FORM 1 or 2]

RESPONSE

The defendant's address for service of documents is:

Defendant's address for service You must tell the court and the other parties immediately if you change this address

I have received a copy of the Claim in this case. Please tick appropriate box or box or boxes

	1.	I agree the claim is correct.			
	2.	I dispute part of the claim.			
	3.	I dispute all of the claim.			
	4.	I want to make a counterclaim.			
(For a proceeding in the Magistrates Court)					

If the defendant objects to the place where the proceeding is to be dealt with:

5.

I object to this proceeding being dealt with at

place

YOU MUST return this form to court, and serve a copy on the claimant, within 14 days from when you received the claim. If you have ticked box 2 or 3 you must file a defence, and serve a copy on the claimant, in 28 days from when you received the claim. If you have ticked box 4 you must file a defence and counterclaim, and serve them on the claimant, in 28 days from when you received the claim.

Signature of defendant's lawyer, OR defendant if defendant does not have a lawyer

Form 8 Defence (r.4.5)

[HEADING AS IN FORM 1 or 2]

DEFENCE

Set out details of defence in numbered paragraphs

1.			
2.			
3.			

Signed by the Defendant OR Defendant's lawyer

at		 	 	
	Place			
on				
	Date			
Date	of filing:	 	 	

Defendant's signature OR defendant's lawyer's signature

If the defendant has not filed a response: The defendant's address for service is:

name and address of defendant's lawyer OR Defendant's name and address, if defendant does not have a lawyer

Filed by:

Form 9 Reply (r.4.6)

[HEADING AS IN FORM 1 or 2]

REPL	Y.
------	----

Set out details of reply in numbered paragraphs

1.			
2.			
3.			

Signature of claimant's lawyer, or claimant if claimant does not have a lawyer

[FILING PARTY DETAILS AS IN FORM 4]

Form 10 Application (r.7.2)

applies for:

[HEADING AS IN FORM 1 or 2]

APPLICATION

Applicant's address

of

Applicant's name
Set out details of application in numbered paragraphs
1.
2.
on the grounds that: set out reasons for making application in numbered paragraphs
1.

2.

Signature of applicant's lawyer, or applicant if applicant does not have a lawyer

Form 11 List of documents (r.8.5)

[HEADING AS IN FORM 1 or 2]

(CLAIMANT'S/DEFENDANT'S) LIST OF DOCUMENTS

I ______ the Claimant/Defendant swear the following is true:

- 1. I understand my obligation to disclose documents.
- 2. To the best of my knowledge I have disclosed all documents that I must disclose.
- 3. The documents relating to this proceeding that are or have been in my control are listed in Schedules 1 and 2.
- 4. I have in my possession the documents listed in Parts 1 and 2 of Schedule 1.
- 5. I have had in my possession the documents listed in Schedule 2 but no longer have them in my possession.
- 6. I claim the documents listed in Part 2 of Schedule 1 are privileged because

set out reasons

7. I do not have and have not had control of any other documents relating to this proceeding.

SCHEDULE 1 Part 1 List documents

SCHEDULE 1 Part 2

List documents

SCHEDULE 2

List documents

[JURAT ETC AS IN FORM 3]

Form 12 Request for default judgment, fixed amount (r.9.2)

[HEADING AS IN FORM 1 or 2]

REQUEST FOR DEFAULT JUDGMENT (FIXED AMOUNT)

	of							
Claimant's name		Claimant	's address					
	It judgment	_		-	on the or being			
The Claimant claims:								
Interest: Filing and Service Fees: Costs: Total Claimed:								
Signature of claimant's lawyer, or claimant if claimant do	es not have a lawyer							
[FILING PARTY DETAILS AS IN	FORM 4]							
		Form	13 Req	uest for de	fault judgn	nent, dama	ages (r.9.:	3)
				[HEADI	NG AS	IN FORI	/I 1 or 2	2]
REQUEST FC	R DEFAUL	r judg	MENT	(DAMA)	GES)			
Claimant's name	of	Claimant	's address	· · · · · · · · · · · · · · · · · · ·				
1. requests the court to give the defendant has not filed a claim in this proceeding; and respon				af				
2. asks the court to determin	e the amour	nt of dan	nages.					

Signature of claimant's lawyer, or claimant if claimant does not have a lawyer

Form 14 Application to set aside default judgment (r.9.5)

[HEADING AS IN FORM 1 or 2]

	APPLICATION	N TO SET ASIDE DEFAULT JUDGMENT	
1.		of	
	Claimant's name	Claimant's address	
appl	ies for the default judgment s	signed against the applicant on be se	t aside
2.	The applicant did not resp	pond to the claim or defend the claim because:	
	set out reasons		
3.	The applicant's defence t	to the claim is:	
	set out details of defence		
0			
Signatu	ure of applicant's lawyer, or applicant if claimant	does not have a lawyer	
		Form 15 Application for summary judgme	
		[HEADING AS IN FORM	1 or 2
	APPLICA	ATION FOR SUMMARY JUDGMENT	
DAT	E OF FIRST HEARING	YOU MUST ATTEND COURT ON THIS	
		of	S DAT
Claima			6 DAT
	nt's name	Claimant's address	S DAT
appl	^{nt's name} ies for summary judgment ag	Claimant's address	S DAT
The	ies for summary judgment ag	Claimant's address	
The beca	ies for summary judgment ag applicant believes the defend	Claimant's address	
The beca	ies for summary judgment ag applicant believes the defend ause:	Claimant's address	
The beca	ies for summary judgment ag applicant believes the defend ause:	Claimant's address	

Signature of applicant's lawyer, or applicant if claimant does not have a lawyer

Form 16 Offer to settle claim (r.9.7)

[HEADING AS IN FORM 1]

The		c	offers to sett	le this cla	aim.		
If for m	oney se	ttlement:					
1.	by	accepting OR paying		VT		·	
This ar	nount ind	cludes VT	_ for interes		des OR does not inclu	VT	insert amount
for cost	ts.						
2.	VT	is to	be paid by	insert date. Of	R if by instalments, sta	ate how amount is t	o be paid
3.	The			days fro	m the date be		
			AND	/ OR			
lf for se 4.	ettlement by	t other than money:					
5.	set out what	t is to be done	_ is to be do	one by	date		
6.	The	has Claimant or Defendant	number of a		m the date be	low to acce	ept this offer.
Signed	by the	 Claimant's or Defendant's	lawyer at	Place			
on	Date						
	Signature of	f Claimant's / Defendant's lawyer					
4.	To acc	ept this offer, sign be	low, file this	with the	court and not	ify the othe	r party.
Signed	by the	Claimant's or Defendant's	lawyer at	Place			
on	Date						
	Signature of	f Claimant's / Defendant's lawyer					
Filed o	n	date of filing				(Seal of c	ourt)

OFFER TO SETTLE CLAIM

Form 17 Application for judgment, settlement (r.9.7)

[HEADING AS IN FORM 1]

		APPLICAT	TION FOR JU	IDGMENT (SETTLEMENT)
DATE	OF FIRS	T HEARING		YOU MUST ATTEND COURT ON THIS DATE
Claimant's	s name		_ of	Claimant's address
applie	s for judg	ment against the	defendant or claimar	on the ground that:
1. settler	the clai ment form		lant agreed to	o settle this proceeding as set out in the attached
2.	the	defendant or claimant		has not paid as agreed in the settlement form.
OR				
3. settler	the ment form	defendant or claimant		has not complied with the terms of the
Signature	of claimant/defe	endant's lawyer, OR		

signature of claimant/defendant if claimant/defendant does not have a lawyer

Form 18 Notice of discontinuance (r.9.9)

[HEADING AS IN FORM 1 or 2]

NOTICE OF DISCONTINUANCE

The claimant has discontinued this proceeding against you.

Signature of claimant's lawyer, or claimant if applicant does not have a lawyer

Form 19 Certificate of telephone evidence (r.11.8)

[HEADING AS IN FORM 1 or 2]

CERTIFICATE OF TELEPHONE EVIDENCE

1			of		
	name of magistrate, police officer or cl certify that:	nief	address		
1.	I was present when	name of witne		_ gave evidence	by telephone at
				at	
	place evidence given		late evidence given	ut	time
2.			is pe	ersonally known t	o me.
	name of witness				
3.	name of witness		_ seemed to	give the evidenc	e freely.
Signed	by)			
)			
name of ma	gistrate, police officer or chief		signature		
at		-			
ON		_			
BEFOF	REME				
Signed	by))		
)			
name and a	ddress of witness		Witness'	signature	

Form 20 Summons to give evidence and produce documents (r.11.4)

[HEADING AS IN FORM 1 or 2]

SUMMONS TO GIVE EVIDENCE AND PRODUCE DOCUMENTS

то			of		
	name of person summone	ed	address	5	
You m	ust attend the		Court at		
on		Supreme OR Magistrates		place	
U.I.	date	4.	time		
1.	to give evidence	in this proceedir	ng at the requ	lest of	name of party issuing summons
			AND / OR		
2.	you must bring t	he following doc	uments and /	or objects	with you:
	list documents and object	6			
				Seal o	f court
	Signature of judge / magis	strate	date		_
WARN and fin	IING: If you led or put in priso		court, you ma	y be arres	sted, brought to court
					Form 21 Enforcement order (r.14.2)
				(н	EADING AS IN FORM 1 or 2]
		ENFO	RCEMENT O	RDER	
THE C	OURT ORDERS	THAT:			
Name of er	nforcement debtor		must:		
Set out det	ails of order in numbered pa	ragraphs			
1.					

2.

[COURT SEAL + SIGNATURE AS IN FORM 20]

Form 22 Enforcement warrant (money order) (r.14.2)

[HEADING AS IN FORM 1 or 2]

		,
TO:	title of onforcement officer	
Name of enforcement debtor:	title of enforcement officer	
Enforcement debtor's address:		
Amount recoverable under this warrant:	Interest:	VT VT VT
YOU are authorised to: Set out details of actions authorised under warrant in numbered particular to the set of the set o		
1. 2.		
This warrant ends on		-
[COURT SEAL + SIGNATURE AS IN F	ORM 20]	
	Form 23 Enforcement	warrant (non-money order) (r.14.2)
	[HE/	ADING AS IN FORM 1 or 2]
ENFORCEMENT W	ARRANT (NON-MONEY	ORDER)
то:	,	
Name of enforcement officer Name of enforcement debtor:	title of enforcement officer	
Enforcement debtor's address:		
YOU are authorised to: Set out details of actions authorised under warrant in numbered particular to the set of the set o	aragraphs	
1. 2.		
This warrant ends on Date warrant ends		-

ENFORCEMENT WARRANT (MONEY ORDER)

[COURT SEAL + SIGNATURE AS IN FORM 20]

Form 24 Summons to attend enforcement conference and produce documents (money order) (r.14.3)

[HEADING AS IN FORM 1 or 2]

SUMMONS TO ATTEND ENFORCEMENT CONFERENCE AND PRODUCE DOCUMENTS (MONEY ORDER)

то			of				
	name of person summoned	k		address			
The		Court made an	enforce	ement or	der against you on	I	
	Supreme OR Magistrates					date order made	
You mu	ust attend the		Co	ourt at			
		Supreme OR Magistrates			place		
on		at					
	date		time				

- 1. to say how you will comply with the enforcement order.
- 2. you must bring with you sufficient documents to enable you to give a fair and accurate picture of your financial circumstances.

[COURT SEAL + SIGNATURE AS IN FORM 20]

WARNING: If you do not come to court, you may be arrested, brought to court and fined or put in prison.

Form 25 Application for enforcement warrant (r.14.12)

[HEADING AS IN FORM 1 or 2]

APPLICATION FOR ENFORCEMENT WARRANT

	of		
Applicant's name		Applicant's address	
applies for a	an enforcement warrant against		
	on the groun	ds that:	
name of enforceme	ent debtor or person against enforcement order made		
1. An	enforcement order was issued by the	Supreme OR Magistrates	_ court on
requiring			to do the following
	name of enforcement debtor OR person against who	m enforcement order made	e
set out details of er	forcement order		

2. The enforcement debtor has not complied with the order

Signature of applicant's lawyer, OR signature of applicant if applicant does not have a lawyer

Form 26 Notice about redirection of earnings (r.14.29)

[HEADING AS IN FORM 1 or 2]

NOTICE ABOUT REDIRECTION OF EARNINGS

TO:	of					
	Name of emp	ioyer		address of employer's place	ce of business	
1. The	Supreme OR	Court has issued ar Magistrates	n enforce	ment warrant fo	r the redirection of the	
earning		name of enforcement debtor		who is e	mployed by you.	
2. The	warrant h	nas been served on you.				
3. Und	er the wa	rrant, you must:				
(a) ded	luct the a	mount stated in the war	rant from	the earnings of		
(unless	the amo	unt remaining to be paid	is less);	and	name of enforcement debtor	
(b) pay	that amo	name of enforcement cred		whose name	is in the warrant.	
Howeve	er, if the c	deduction amount would			with less	
than	amount of tak	e-home pay fixed by court		name of enforcement debt you must deduc	or ot only what will leave	
him / he		amount of take-home pay fixed by court		in take-hom	ne pay.	
4. If yo	u are not	the employer of	prcement debto		_, or stop being	
his / he	r employe	er, you must notify the	Supreme OR		oon as practicable.	

Signature of enforcement creditor's lawyer, OR signature of enforcement creditor if enforcement creditor does not have a lawyer

Form 27 Summons under enforcement order (non-money) (r.14.37)

[HEADING AS IN FORM 1 or 2]

SUMMONS TO ATTEND ENFORCEMENT CONFERENCE AND PRODUCE DOCUMENTS (NON-MONEY ORDER)

1		of		
name of person summon	ed	address		
ne	_ Court made an e	enforcement o	rder against you o	n
Supreme OR Magistrates	8		U V	date order made
ou must attend the		Court at		
	Supreme OR Magistrates		place	
า	at			
date	ti	ime		

to say how you will comply with the enforcement order.

You must bring with you sufficient documents to enable you to tell the court how you propose to comply with the enforcement order.

[COURT SEAL + SIGNATURE AS IN FORM 20]

WARNING: If you do not come to court, you may be arrested, brought to court and fined or put in prison.

Form 28 Claim for release (r.16.4)

[HEADING AS IN FORM 1]

Date of Filed by Address Service	/:s for		
The clai	mant claims the release of	eing held unlaw	fully on the grounds:
Set out details 1. 2.	s of claim in numbered paragraphs		
Signed I at	by or on behalf of the Claimant)	
on	Place Date)	Signature of claimant OR person on behalf of the claimant

CLAIM FOR RELEASE

Form 29 Certificate of account (r.19.13)

[HEADING AS IN FORM 1 or 2]

I		of	
	name of accounting party certify that:		address
1.	The account of		_ has been taken in accordance with the order
	of the Supreme Court dated	date of or	der
2.	A copy of the account is attach	ed.	
Signed	d by))	
name of pe	erson taking account)	signature
at			
BEFO	RE ME		
Signed	d by))	
name and	address of witness	,	Witness' signature

CERTIFICATE OF ACCOUNT

Form 30 Claim for Domestic Violence Protection Order (r.16.16)

[HEADING AS IN FORM 1 or 2]

CLAIM FOR DOMESTIC VIOLENCE PROTECTION ORDER

			a)	Non violence
			b)	Exclusive occupation
			C)	Non Molestation
(Write	e the full na	ame of the applicant here)		
		cant's address)		
AP	PLY fo	or the following orders	(delete as app	propriate)
	(a)	Non Violence		
	(b)	Exclusive Occupati (Give full address)	ion of the	home situated at
	(c)	Non Molestation Or	der	
	(d)	Costs		
FO	R:			
	a)	Myself		
	b)	A Child/Children of th	e Family	
	Give nam	ne(s):		

MY GROUNDS are set out in the sworn statement attached.

DATED

Signed:

I,of......

AGREE to obey any order this Court may make against me for costs or damages if the Court finds that I should not have made this application.

Signed by the claimant

Form 31 Sworn Statement (Domestic Violence) (r.16.16)

[HEADING AS IN FORM 1 or 2]

1	Name of person making statement (Write your full name)
	(Write your full address)
swear	the following is true: -
1.	I am the Claimant.
2.	I am applying on behalf of myself and/or the following child/children of the Family: (Cross out the words that do not apply) (Write the names of the child or children on the lines below)
3.	The Defendant and I are members of the same family. The defendant is:
	(State the relationship between yourself and the defendant on the line below)
4.	The home where I/ and the children (Cross out if you are only applying for yourself)
	live is at:
5.	The defendant lives: (If the defendant lives with you write WITH US)
	If the defendant lives somewhere else write where this is:
6.	My work is:
7.	If you have been to see a doctor or have taken any of the children to see a doctor because of what happened you should tick the box and staple or clip the doctor's note to this form.
8.	I believe I need these orders for my/our protection (Cross out OUR if you are just applying for yourself)
9.	Write down what happened and what the respondent has done or has threatened to do to make you ask the court to help you
	(continue on separate handwritten paper if necessary)

[JURAT ETC AS IN FORM 3]

Form 32 Order (Domestic Violence) (r.16.17)

[HEADING AS IN FORM 1 or 2]

ORDER (DOMESTIC VIOLENCE)

- a) Non violence
- b) Exclusive occupation
- c) Non Molestation

and **READING** the Documents placed before the court, the **COURT MAKES THE**

FOLLOWING ORDER(S) against the Defendant: -

Set out details of orders

THE COURT ORDERS that(insert name) must serve this order on the Defendant(insert name) and(insert name) must serve a copy on the Police. If the Defendant(Insert name) does not obey all of these orders then the police must arrest him/her and bring him/her to court as quickly as possible.

WARNING TO THE DEFENDANT

If you do not obey these orders then you can be arrested. You will then be brought before the court and may be fined and/or sent to prison.

(If the order was made without the defendant being present)

The next hearing of this matter is on:....

date of hearing

YOU MUST ATTEND

If you disagree with this order you should go to the court and ask for an earlier hearing date.

DATED

Signed: Magistrate/Supreme Court Judge.

Form 33 Appeal (r.16.28)

IN THE	COURT OF		CIVIL APPEAL CASE NO	OF
THE REPUBLIC OF VAI	NUATU			
(CIVIL JURISDICTION)				
			BE	TWEEN
			Арр	ellant's name
			Appellant's lawyer's name or Appell	ant's address
				AND
			Defer	ndant's name
			Defendant's lawyer's name or Defenda	int's address
	APPEAL			
Appellant's name	of	Appellant's ac		eal for:
Set out details of appeal in numbered par	agraphs			
1. 2.				
on the grounds that: set out reasons for making appeal in num	bered paragraphs			
1. 2.				

Signature of applicant's lawyer, or applicant if applicant does not have a lawyer

Form 34 Claim for judicial review (r.17.4)

[HEADING AS IN FORM 1]

Service name and address of Claimant's lawyer OR Claimant's name and address, if claimant does	
The Claimant claims	
a declaration that	is of no effect
name of enactment	
a mandatory order requiring	to
set out desired action	
OR	
an order prohibiting	from
name of person	
set out action to be prohibit	ted
OR	
a quashing order that	by
describe decision	by
	is quashed.
name of person who made decision	
Set out grounds supporting claim in numbered paragraphs:	
1.	
2. 3.	
Signed by the Claimant OR Claimant's lawyer) at)	ature of claimant OR claimant's lawyer
ON)	

CLAIM FOR JUDICIAL REVIEW

Form 35 Notice of beginning or ceasing to act (r.18.8)

[HEADING AS IN FORM 1 or 2]

NOTICE O	F BEGINNING/CEASING TO A	ACT
----------	--------------------------	-----

I,				
of		Lawyer's name		
		name and address of	f firm	
have	begun OR ceased	to act for the	Claimant OR Defendant	in this proceeding.
Signature	of lawyer			
	G PARTY DETAILS A	S IN FORM 41		
			Fo	rm 36 General warrant (r.18.15)
			[HEAD	ING AS IN FORM 1 or 2]
		GENERAL	WARRANT	
		ULILIAL		
TO:	Name of enforcement officer	title of enf	prcement officer	
Name	of person against who	m warrant issued:		
Addres	ss of person against w	nom order made:		
YOU	are authorised to:			
	tails of actions authorised under warra	nt in numbered paragraphs		
1.				
2.				

[SEAL + SIGNATURE AS IN FORM 20]

THIS PAGE IS LEFT INTENTIONALLY BLANK THE NEXT PAGE IS 435