MALHEUR COUNTY CIRCUIT COURT
S.A.F.E. COURT PROGRAM
Malheur County Courthouse
251 B Street West – PO Box 670
Vale, OR 97918
541/473-5568

S.A.F.E. COURT PROGRAM DECLINED

State of Oregon vs. _____

Case Number(s) _____

I have been advised of the Court's S.A.F.E. Court Program by the Court as
well as my attorney, or a member of the SAFE Court Team. I have reviewed the Notice to Defendants and the S.A.F.E. Court Petition, Waiver and Agreement. I fully understand the opportunity it affords me and the responsibilities it would incur upon me. I further understand that an election to participate must be made today and an election to not participate will result in my case being placed on the regular docket for further proceedings. I further understand that I may not elect to participate in this program at any future date in this case.

I hereby elect to not participate in the Circuit Court S.A.F.E. Court Program.

_____ _____ _____
Signed Name Date Print Name

_____ _____ _____
Attorney for Defendant Date Print Name

OSB #_____