IN THE CIRCUIT COURT OF THE STATE OF OREGON

FOR THE COUNTY OF POLK

STATE OF OREGON	)	
	)	
vs.	)	Case No. _____
	)	
_____,	)	
Defendant	)	

TRIAL BY AFFIDAVIT

STATE OF OREGON,)
) ss.
County of POLK)

I, _____, hereby waive my right to a trial by personal appearance in Court and submit my evidence by this affidavit to the Court. I understand that I will be notified by mail of the Court's findings. The testimony that I wish to submit for consideration by the Court is as follows: (Attach additional pages if needed)

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SIGNATURE:_____

Mailing Address:_____

City/State/Zip:_____

WITNESSED on this _____ day of _____, 20_____.

TRIAL COURT ADMINISTRATOR

By:_____
Court Operations Specialist/Notary Public
My commission expires:_____