IN THE MUNICIPAL COURT OF THE CITY OF STAYTON COUNTY OF MARION, STATE OF OREGON

260 N. Second Ave. P.O. Box 430 Stayton, Oregon 97383

City of	Stayton Plaintiff)	DEFENDANT'S WAIVER OF ORAL TESTIMONY (Trial by Affidavit)	
	V)	Case/Citation #	
	Defendant)		
Court a that the	nd authorize testimony to be in the f	orm	my rights to have testimony presented in open of an affidavit. I realize by signing this waiver pear in Court. I also realize that I need not appear	
I furthe	r state my intentions as follows:			
	affidavit containing my testimony a thirty (30) days of today's date, and days, I authorize the Court to decide	nd a l if l e wl e Co	ing and declare that I will submit to the Court my affidavits of witnesses, if any, to the Court within I fail to submit said affidavit within thirty (30) hether I am guilty or not guilty based upon the purt will also consider the officer's affidavit in lty.	
	I do not waive my right to be present at a hearing and request that I be notified of the date and time of hearing. I waive my right to have the officer testimony presented orally in court.			
			WAIVE MY RIGHT TO HAVE TESTIMONY THIS MATTER BE DECIDED AS STATED ABOVE.	
Dated:				
			Signature Print Name	
——— Mailin	Mailing Address		City, State, Zip Code	

IN THE MUNICIPAL COURT OF THE CITY OF STAYTON COUNTY OF MARION, STATE OF OREGON

260 N. 2nd Ave. P.O. Box 430Stayton, Oregon 97383

City of Stayton Plaintiff v Defendant)	DEFENDANT'S AFFIDAVIT (Trial by Affidavit) Case/Citation #
I,appearance in Court and submit my evid will be notified by mail of the findings.	len	, hereby waive my right to trial by personal ce by this affidavit to the Court. I understand that I
The testimony that I wish to submit for a swear/affirm the following is true:	con	sideration by the Court is as follows, and I

I recognize that the foregoing is offered to the court as my testimony in this matter, that it is to be used by the judge to render a decision and enter a judgment, and that it is therefore subject to the penalties for perjury. By signature below, I swear, promise or affirm that my statement above is the truth. Signature: Print Name: Mailing Address:	
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Mailing Address:	
City State 7in.	
	City, State, Zip: