

**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)	DEFENDANT'S WAIVER OF ORAL
)	TESTIMONY (Trial by Affidavit)
Plaintiff)	
V)	Case/Citation # _____
_____)	
Defendant)	

I have pled **NOT GUILTY** and I hereby waive my rights to have testimony presented in open Court and authorize testimony to be in the form of an affidavit. I realize by signing this waiver that the officer may file an affidavit and not appear in Court. I also realize that I need not appear in person, but may appear by affidavit.

I further state my intentions as follows:

- I waive my right to be present at a hearing and declare that I will submit to the Court my affidavit containing my testimony and affidavits of witnesses, if any, to the Court within thirty (30) days of today's date, and if I fail to submit said affidavit within thirty (30) days, I authorize the Court to decide whether I am guilty or not guilty based upon the contents of my file. I understand the Court will also consider the officer's affidavit in deciding whether I am guilty or not guilty.

- 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.

I CERTIFY THAT I HAVE READ THE ABOVE AND WAIVE MY RIGHT TO HAVE TESTIMONY PRESENTED IN OPEN COURT. I REQUEST THAT THIS MATTER BE DECIDED AS STATED ABOVE.

Dated: _____

_____ Signature	_____ Print Name
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Mailing Address

City, State, Zip Code

