



F-26

AFFIDAVIT

I, _____, swear/affirm that I have never been convicted of a felony or any other crime that would prevent me from being certified as a police officer, corrections officer, parole and probation officer, telecommunicator or emergency medical dispatcher, under ORS 181.610 to 181.670. Subscribed and sworn to before me this _____ day of _____, _____, county of _____, State of Oregon.

Signature

DPSST # _____

(seal/stamp)

Notary Public for Oregon

My Commission Expires: _____