KITSAP COUNTY DISTRICT COURT STATE OF WASHINGTON

In The Matter Of The Impoundment Of A	No Vehicle Impound Declaration Of Witness
	<u>ARATION</u>
My name is	I make the following declaration –



(attach additional pages if necessary	
, , ,	perjury under the laws of the State of Washington that the I am the person whose name I typed (or wrote) below.
SIGNED at (city)	, (state) on (date)
	/s/ Signed Electronically
Note – By typing your name, you in	end to sign electronically and agree your electronic signature
is the same as a handwritten signature	e for the purpose of validity, enforceability, and admissibility. ANT CONTACT INFORMATION
is the same as a handwritten signature DECLAR	e for the purpose of validity, enforceability, and admissibilit
DECLAR The contact information for number is required) –	e for the purpose of validity, enforceability, and admissibility. ANT CONTACT INFORMATION
DECLAR The contact information for number is required) – Mailing Address –	for the purpose of validity, enforceability, and admissibilit ANT CONTACT INFORMATION is as follows (only one telepho
DECLAR The contact information for number is required) – Mailing Address – City, State, Zip –	e for the purpose of validity, enforceability, and admissibility NT CONTACT INFORMATION is as follows (only one telephone)
DECLAR The contact information for number is required) – Mailing Address – City, State, Zip – Email –	e for the purpose of validity, enforceability, and admissibility. INT CONTACT INFORMATION is as follows (only one telephone).
DECLAR The contact information for number is required) – Mailing Address – City, State, Zip – Email – Cell –	e for the purpose of validity, enforceability, and admissibility NT CONTACT INFORMATION is as follows (only one telephone)