DEFENDANT'S STATEMENT

The following is my written statement explaining the circumstances. I certify (or declare) under penalty of perjury under the laws of the Swinomish Tribal Community that the following statement is true and correct.

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I promise that if it is determined that I committed the infraction for which I was cited, I will pay the monetary penalty authorized by law and assessed by the Court.

_____ _____

Date and Place Signature

Hearing Date & Time:_____ _____

Ticket No._____

_____

Address

Mail or deliver to:

Swinomish Tribal Court
17337 Reservation Road
LaConner, WA 98257 (360) 466-7217 or 2097

The court must receive your declaration AT LEAST FIVE (5) DAYS PRIOR to the scheduled hearing date.