## ISSAQUAH SCHOOL DISTRICT 411 School Bus Stop Signal Safety Program AFFIDAVIT OF NON-LIABILITY

Notice of Infraction #:		Notice #:	
Vehicle License Plate #	t:	State:	
upper right of the front of vehicle involved in the	must accurately write the Infraction the Notice of Infraction. Also plea violation. Please write clearly a unclear or incorrect, we may not	ase provide the license plate ar and record the information acc	nd state for the curately. If the
	f Infraction listed above. At the vehicle described in the Noti		dicated in the
	py of either a bill of sale OF icle was taken off of policy		
☐ Stolen (provide veh	icle or license plate; include a	copy of the police report)	
■ Not in my care, cus	tody or control (provide the di	river's name and address bel	ow)
Name:			
Address:			
	Street	City Sta	•
Your Affidavit will be review	ved by the King County District Cou	urt. You will be notified of the outc	ome by mail. I
	perjury that the information provi		
Your Signature		Date	
Print your name	Your telephone number	Your email address	3
Your mailing address	Your city	Your state	Your zip code

Mail to: King County District Court Issaquah Courthouse 5415 220th Avenue SE Issaquah, WA 98029-6839