COVID-19 Temporary Verification

This Form is intended to be a required supplement to State Bar of Arizona applications and certifications during the period of pandemic health advisories and the related emergency orders of the federal government, the Governor of Arizona, and the Supreme Court of Arizona. This unsworn declaration, under penalty of perjury, is to be submitted in lieu of a notarized verification pursuant to Arizona Rules of Civil Procedure, Rule 80(c).

State of)	
) ss. County of)	
I,, a member of the State Bar of, sub unsworn verification in support of my:	mit this
☐ Resignation of Membership	
☐ Application for Appearance Pro Hac Vice	
☐ Application for In-House Counsel certification	
☐ Application for transfer to Inactive / Retired status	
☐ Application for Reinstatement after Summary Suspension by the Board of Gov	vernors
I hereby declare and verify, under the penalty of perjury, that the foregoing information ar the applicable application form is true and correct.	ıd that on
Dated:	
Attorney signature	