

**IN THE LAKEWOOD MUNICIPAL COURT  
CITY OF LAKEWOOD, STATE OF WASHINGTON  
6000 Main St SW  
Lakewood, WA 98499  
253 512-2258 (Fax 253 512-2267)**

<b>City of Lakewood,</b>	)	<b>Violation No:</b> _____
	)	
<b>Plaintiff</b>	)	<b>PHOTO INFRACTION</b>
	)	<b>SWORN AFFIDAVIT</b>
	)	
<b>VS</b>	)	
	)	
	)	
<b>Defendant</b>	)	
<b>(please print full name)</b>	)	

*\*Please note specifics, such as time and location, vehicle license number and any other relative information.*

---

---

---

---

---

---

---

**I certify (or declare) under the penalty of perjury under the laws of the State of Washington that the foregoing is a true and correct statement.**

**Dated this** \_\_\_\_\_ **day of** \_\_\_\_\_ **20** \_\_\_\_\_  
**By:** \_\_\_\_\_  
**Signature**