



Deschutes County

Attestation of Eligibility to Serve as Sheriff

- ☐ I declare that I am eligible to serve as Sheriff for Deschutes County in accordance with ORS 204.015 and ORS 204.016.
- ☐ I understand that my letter of interest submitted for this appointment will be shared publicly after any non-disclosable personal information is redacted.

Signature

Date

Print name

Email: _____

Phone: _____