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)	
County of) ss.)	
I,	, a member of the State Bar of	, submit this
unsworn verification in sup	port of my:	
☐ Resignation of I	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 Governors
I hereby declare and verify,	under the penalty of perjury, that the foregoing ir	nformation and that on
the applicable application fo	orm is true and correct.	
Dated:	<u> </u>	
	Attorney signature	