

1,

OFFICE OF THE MINNESOTA SECRETARY

OF STATE Steve Simon

MICHEVE WILLERT

, do solemnly affirm that I will support the

FILED

SECRETARY

JUL

Constitution of the United States and the Constitution of the State of Minnesota, and that will faithfully discharge the duties of the office of:

Person Receiving Services or Family Member Representative

Community First Services and Supports Development and Implementation Council

to the best of my judgment and ability, under the penalty of perjury.

I certify that I am authorized to execute this oath, and I further certify that I understand that by signing this oath I am subject to the penalties of perjury as set forth in Minnesota Statutes section 609.48 as if I had signed this oath before a notary public.

Maters Willer (Print Name)

(Date)

Return completed oath to: official.documents@state.mn.us

Or mail to: Minnesota Secretary of State Steve Simon Official Documents 180 State Office Building 100 Rev Dr Martin Luther King Jr Blvd St Paul, MN 55155

Rev. 06/2015

200261