

VOLUNTARY SURRENDER OF CERTIFICATE(S)

I hereby voluntarily surrender my certificate(s). Certificate No.: 255774B

I further understand that the Superintendent of Public Instruction will notify other states and public and private school officials within the state of Washington that I have voluntarily surrendered my certificate(s).

Name: CHRISTINE LEVERENZ Certificate No. 255774B

I agree, if I request reinstatement of the certificate(s) I have voluntarily surrendered, to provide the Superintendent of Public Instruction with an affidavit describing in full the reasons for my voluntary surrender of the certificate(s) listed above.

Dated this 3rd day of March, 2021.

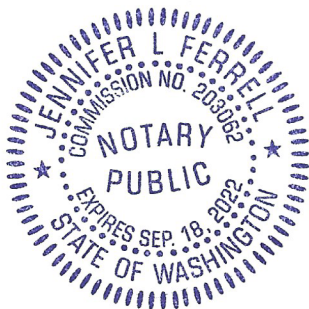
Christine M. Leverenz
Printed Name

[Handwritten Signature]
Signature

[Redacted Address Line]

[Redacted Address Line]

City, State, Zip



SUBSCRIBED AND SWORN to before me this 3rd day of March, 20 21.

[Handwritten Signature]
Notary Public in and for the state of

Washington Residing at Puyallup

My commission expires: 9/18/2022