

VOLUNTARY SURRENDER OF CERTIFICATE(S)

I hereby voluntarily surrender my certificate(s). Certificate No.: 243137G

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: Stephen Tjarnberg Certificate No. 243137G

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.

Per an agreement with the Yakima County Prosecutor's Office, I, Stephen Tjarnberg, agree not to seek reinstatement of my Washington Education Certificate, No. 243137G.

Dated this 6th day of October, 2021.

Steve Tjarnberg
Printed Name

Steve Tjarnberg
Signature

[Redacted]
Address

[Redacted]
City, State, Zip

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20____.

[Signature]

Notary Public in and for the state of ATTORNEY
243341

Residing at _____

My commission expires: _____