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MAR 15 2019

Office of Professional Practices

VOLUNTARY SURRENDER OF CERTIFICATE(S)

I, Randy OTT Jr, hereby voluntarily surrender my certificate(s). Certificate # 446633J

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).

1. Residency Teacher Certificate No. 446633J
2. _____ Certificate No. _____

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 11TH day of March, 2019.

Printed Name Randy Ott Jr

Signature [redacted]

Address [redacted]

City, State, Zip

SUBSCRIBED AND SWORN to before me this day of 11, 2019

A Kelli Jenson

~~Notary Public in and for the state of~~

_____. Residing at Spokane, Washington

My commission expires: 11/5/20

A KELLI JENSON
COMMISSION EXPIRES
NOTARY PUBLIC
11/05/2020
STATE OF WASHINGTON