OATH OF OFFICE

(Commissioner Name)

STATE OF WASHINGTON,

COUNTY OF SKAGIT

I, (Commissioner name), do solemnly swear (or affirm) that I will support the Constitution and Laws of the United States and the Constitution and Laws of the state of Washington and that I will faithfully and impartially perform and discharge the duties of the office of Commissioner, Skagit County Public Hospital District No. 1, Position Number (#), state of Washington, according to law and to the best of my ability and understanding.

(Commissioner Name)

Subscribed and sworn to before me this _______ day of ______, 2011.

Bradford E. Furlong, WSBA # 12924
Notary Public in and for the state of Washington
Commission Expires November 1, 2012