

STATE OF _____ } ss.
County of _____

The undersigned who has been appointed to the office of
MEMBER, BOARD OF HEALTH

but has not yet entered upon the duties thereof, swears that he will support the constitution of the United States and the constitution of the State of Wisconsin, and will faithfully discharge the duties of said office to the best of his ability.



IAN MARTIN

Subscribed and sworn to before me this 5 day of
Jan., 2021.


CITY CLERK

My commission expires 7-5-2024