

\* Recording Requested By /  
 \* Stephanie Ross, Sovereign /  
 \* And When Recorded Mail To: /  
 \* ( [Name & Address Etc.] ) /  
 \* ( Stephanie Ross, Sovereign ) /  
 \* (Non Domestic Mail, S35, T2N, R4E, ) /  
 \* ( c/o P.O. Box 355 ) /  
 \* (N. Bonneville, Washington Republic) /  
 \* [Zip Code Exempt] /

FILED FOR RECORD  
 SKAMANIA CO. WASH  
 Stephanie Ross

AUG 11 10 07 AM '94  
 P. Johnson  
 AUDITOR  
 GARY M. OLSON

Space Above This Line For Recorders Use

120247

# DECLARATION OF ALLEGIANCE

I, Stephanie Ross, a Sovereign in & over the \*Washington State Republic hereby make this declaration of allegiance first to my Creator and His Law, & second, to the \*Washington State Republic. I will defend & protect the Constitution of the \*Washington State Republic from both foreign and domestic enemies. This declaration of allegiance supersedes and makes null and void all previous oaths or declarations of allegiance that I may have made to any foreign State or foreign corporation.

Name Stephanie Ross, Sovereign  
 Address Non Domestic Mail, Sec. 35, Township 2N, Range 4E,  
 Address c/o P.O. Box 355  
 City N. Bonneville, Washington Republic [Zip Code Exempt]

As a Sovereign, I now affix my signatures to this declaration and affirmation, but add that the use of notary below is for purpose of signature identification only and as the affiant I accept no foreign jurisdiction by the use thereof and hereby make explicit reservation of all of my rights under all forms of law: Subscribed and affirmed this 11 day of AUG, 1994.

Stephanie Ross  
 Stephanie Ross, Sovereign Affiant

WASHINGTON State )  
 ) ss.  
 SKAMANIA County )

On this 11 day of AUG, 1994, before me a Notary Public for the State of WASHINGTON, County of SKAMANIA personally appeared STEPHANIE ROSS,

[I personally known to me (or) M proved to me on the basis of satisfactory evidence to be the Citizen/s, or Sovereign/s whose name/s is/are subscribed to this instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized status or capacity/ies and and official seal.

Notary Public

Gary M. Olson  
 Comm. Exp 10-31-96

Registered ☒  
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