## CITY OF LYNDEN

FIRE DEPARTMENT (360) 354 – 4400



## Assistant Fire Chief Oath of Office

I,	_ do solemnly swear to faithfully
honestly, and impartially perform r	my duties as Assistant Fire Chie
for the City of Lynden to the best of	of my ability; to serve the Lynder
Fire Department with respect ar	nd dignity; to honor the vision
mission, and values of the City of	Lynden; to serve the citizens of
the City of Lynden with compassion	on, courage and integrity; and to
uphold the laws and constitutions	of the United States of America
the State of Washington, and the City of Lynden; so help me God.	
Assistant Fire Chief Signature	Date
Mayor Signature	Date