
*In Re Pupil Transportation
Buffalo Public Schools District*

**PARENT/GUARDIAN
AFFIDAVIT**

Parent(s)/Guardian(s)

Buffalo Public Schools District Student

**AFFIDAVIT OF PARENT/GUARDIAN
OF BUFFALO PUBLIC SCHOOLS DISTRICT STUDENT**

STATE OF NEW YORK }
COUNTY OF ERIE }
CITY OF BUFFALO }ss:
 }

I, _____, being duly sworn, and under penalty of perjury, deposes and says:

1. That I am over the age of 18, a resident of the State of New York, County of Erie, and City of Buffalo.

2. That I am the parent/guardian of _____, who is a _____ grade student at _____ school within the Buffalo Public Schools District.

3. That I knowingly and voluntarily offer this affidavit in support of a complaint, petition or assertion that my child is exposed to unreasonable risk, danger or harm while being transported to or from school by the Buffalo Public Schools District, its' agents, employees or contractors. Contrary to

Signed: _____

Address: _____

Phone: _____

E-Mail: _____

Acknowledgment

I certify that _____ personally appeared before me
this _____ day of _____ 2019 and acknowledging to me that he/she voluntarily
signed the foregoing document for the purpose stated herein and in his/her individual capacity.

Date: _____

Notary Public, State of New York

My commission expires: _____