

ALL-PURPOSE ACKNOWLEDGMENT

State of _____

County of _____

On _____ before me,
Date

_____, Notary Public
Personally appeared

Printed Name(s) Of Signer(s)

Personally known to me **OR** proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Notary Seal

SIGNATURE OF NOTARY

ATTENTION NOTARY: Although the information requested below is OPTIONAL, it may prove valuable to persons relying on this Acknowledgment and could prevent fraudulent reattachment of this certificate to another document.

THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED BELOW AND MATCH DESCRIPTION OF ATTACHED DOCUMENT(S).

TITLE OR TYPE OF DOCUMENT

NUMBER OF PAGES

DATE OF DOCUMENT

SIGNER(S) OTHER THAN NAMED ABOVE