

Before me the undersigned, a Notary Public in and for said County and State, personally appeared _____, and being first duly sworn upon his oath, state that the foregoing facts are true and accurate to the best of his knowledge and belief.

Signed and sealed this _____ day of _____, 201____.

My Commission Expires: _____
Notary Public

My County of Residence: _____
Printed

Instrument prepared by _____.

I affirm under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law.

Signature

Print Name