

Acknowledgment in an Individual Capacity

This certificate is attached to a _____,

dated _____.

Document information: _____

_____.

STATE OF WASHINGTON

COUNTY OF _____

I certify that I know or have satisfactory evidence that _____

is/are the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument and acknowledged it to be (his/her/their) free and voluntary act for the uses and purposes mentioned in the instrument.

Date: _____

Notary Public

Print name

My commission expires