

California All Purpose Certificate of Acknowledgment

State of _____)
) ss.
 County of _____)

On _____ before me, _____ ,
Date (Title)
 personally appeared _____ who proved to me

Names(s) of Signer(s)

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 the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the state of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature of Notary Public (SEAL)

OPTIONAL

Though the information requested below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent reattachment of this form.

CAPACITY CLAIMED BY SIGNER	DESCRIPTION OF ATTACHED DOCUMENT
<input type="checkbox"/> Individual(s)	_____
<input type="checkbox"/> Corporate(s) Officer(s) _____	Title or Type of Document
_____	_____
(Titles)	Number of Pages
<input type="checkbox"/> LLC Officer(s) _____	_____
_____	Date of Document
(Titles)	_____
<input type="checkbox"/> Partner <input type="checkbox"/> Limited <input type="checkbox"/> General	Signers(s) Other than Named Above
<input type="checkbox"/> Attorney-in-Fact	
<input type="checkbox"/> Trustee(s)	
<input type="checkbox"/> Guardian/Conservator	
<input type="checkbox"/> Other: _____	

SIGNER IS REPRESENTING:
 (Name of persons or entities)
