



I certify that \_\_\_\_\_, whose name is signed above, is known to me and appeared before me and acknowledged that he/she signed it voluntarily.

Dated: \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public/Clerk

Name: \_\_\_\_\_

Attorney for: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Attorney No.: \_\_\_\_\_