A notary public or other officer completing this certificate verifies only the identity of the individual who signed the

document to which this certificate is attached, ar	nd not the truthfulness, accuracy, or validity of that document.
State of California) ss.
County of)
On, bef	ore me,,
Date	Name and Title of Officer
personally appeared	
	f Subscribing Witness
person whose name is subscribed to the	within instrument, as a witness thereto, on the oath of
Name of Credible Witness	, a credible witness who is known to me and
	hoing by mo
provided a satisfactory identifying document.	, being by me Name of Subscribing Witness
duly sworn said that he/she was present and	d saw/heard (1)(,)
day sworn, said that hershe was present and	Name of Principal
(and (2)	,) the same person(s) described in and whose name(s)
Name of Principal	
(a) party(ies) thereto, execute or acknowled	ed instrument in his/her/their authorized capacity(ies) as dge executing the same, and that said affiant subscribed ched instrument as a witness at the request of
(1)	(.) (and (2))
Name of Principal	Name of Principal
	WITNESS my hand and official seal.
	Signature
	Signature of Notary Public
Diggo Notes Coal Above	
Place Notary Seal Above	- OPTIONAL
	g this information can deter alteration of the document or of this form to an unintended document.
Description of Attached Document	
Title or Type of Document:	Document Date:
Number of Pages: Signer(s) Other Than	n Named Above: