

Acknowledgment in an Individual Capacity

State of OREGON

County of _____

This record was acknowledged before me on (date) _____, 20____ by

(name(s)) of individual(s) _____.

Notary Public - State of Oregon

My commission expires _____

Official Stamp

Document Description

This certificate is attached to page ____ of a _____ (title or type of document), dated _____, 20 ____, consisting of _____ pages.