A notary public or other of document to which this cer	fficer completing this certificatificate is attached, and not the	te verifies only the identity the truthfulness, accuracy, or	of the individual who signed the validity of that document.
State of California)		
County of)		
On	before me.		
Date			nd Title of the Officer
personally appeared			
Name(s) of Signer(s)			
subscribed to the within	instrument and acknowlapacity(ies), and that by hi	edged to me that he/sl s/her/their signature(s) c	erson(s) whose name(s) is/are ne/they executed the same in on the instrument the person(s), ment.
			OF PERJURY under the laws a that the foregoing paragraph
		WITNESS my hand and	official seal.
		Signature	
			ature of Notary Public
Place Notary			
Though this section is fraudu		rIONAL information can deter al form to an unintended (teration of the document or document.
Description of Attached	Document		
Title or Type of Docume	Title or Type of Document: Document Date:		
Number of Pages:	Signer(s) Other Than	Named Above:	
Capacity(ies) Claimed by			
Signer's Name:		Signer's Name:	
☐ Corporate Officer — Tit			— Title(s):
☐ Partner — ☐ Limited☐ Individual ☐ Atto	☐ General rney in Fact	☐ Partner — ☐ Lim	
	rdian or Conservator		Attorney in Fact Guardian or Conservator
Other:			Guardian or Conservator
Signer Is Representing: _		Signer Is Represent	ing: