ALL-PURPOSE ACKNOWLEDGEMENT

State of California. (
County of)
On before me,, Date Name and Title of Officer (i.e., Your Name, Notary Public)
personally appeared,
Name(s) of Document Signer(s)
personally known to me (or proved to me on the basis of satisfactory evidence) to be the
person(s) whose name(es) 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 signatures(s) on the instrument the person(s), or the entity upon behalf of which the
person(s) acted, executed the instrument.
WITNESS my hand and official seal.
Signature of Notary