## ALL PURPOSE ACKNOWLEDGEMENT

DATED:	
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, and not the	
truthfulness, accuracy, or validity of that document.	
State of	SPACE BELOW RESERVED FOR NOTARY SEAL
State of County of	
On hoforo mo	
On before me	
, Notary Public,	
personally appeared	
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) 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 signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.	
I certify under PENALTY OF PERJURY under the laws of the State of California	
that the foregoing paragraph is true and correct.	
WITNESS my hand and official seal.	
Signature	
ATTENTION NOTARY: Although the information reque	stad balow is OPTIONAL it could provent
fraudulent attachment of this certificate to another do	
indudulon ditaoninon or this continuate to unother doc	, dillotte
THIS CERTIFICATE <b>MUST</b> BE ATTACHED TO THE DOCUMEN	IT DESCRIBED BELOW.
Title of Document Type	
Number of Pages Date of Document	
Signer(s) Other Than Named Above	