

Acknowledgement in a Representative Capacity

State of Oregon

County of _____

This record was acknowledged before me on (date)_____, 20_____
by (name(s) of individual(s))_____ as
(type of authority)_____ of (name of party on whose
behalf record was executed)_____.

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.