

Affidavit of Attorney-In-Fact (To be completed by Attorney-In-Fact)

State of _____

SS

County of _____

I, _____, being sworn, hereby state that _____, as principal, who
(ATTORNEY-IN-FACT)

resides at _____, did on _____, 20____, appoint me his/her true and

lawful attorney by the authorization on the reverse side of the page.

ATTORNEY-IN-FACT

Notarization (Required)

On this _____ day of _____, 20____, before me personally appeared _____ known to me to be the person(s) described in the foregoing instrument, and acknowledged that he/she/they executed the same as his/her/their free act and deed.

SIGNATURE OF NOTARY PUBLIC

Commission Expiration Date: _____

