AFION LEWS
Commission # 1880720
Notary Public - California
Contra Casta County
My Comm. Expires Feb 6, 200

28

Notary Hublic for California

My commission expires

Teb. U., 2009

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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

IFORNIA ALL-PURPOSE ACK	
State of California	1
:	ss.
County of LOS Angules	_
On March 19, 2005, before me, _	Debra A Schutte No tary Publiz Name and Title of Officer (e.g., Jane Dce, Notary Public') Kearney Name(s) of Staner(s)
Date	Name and Title of Officer (e.g., "Jane Doe, Notary Public")
personally appeared Theodore C	Name(s) of Signer(s)
	personally known to me
	proved to me on the basis of satisfactory evidence
	to be the person(3) whose name(\$) is/are subscribed to the within instrument and acknowledged to me that he/sbe/they executed
DEPRA	the same in his/her/their authorized
DEBRA A. SCHULTE Commission #1311205	capacity(jes), and that by his/her/thei
を表現 Notary Public - California 多	signature(x) on the instrument the person(x), o
LOS Angeles County	the entity upon behalf of which the person(state) acted, executed the instrument.
MyComm. Expires Jun 29, 2005	acted, executed the matrament.
	WITNESS my hand and official seal.
	Dibra a Schulte
Place Notary Seal Above	Signature of Notary Public
	DTIONAL
-	PTIONAL aw, it may prove valuable to persons relying on the document
	aw, it may prove valuable to persons relying on the document and reattachment of this form to another document.
,	
Description of Attached Document	
Title or Type of Document:	
The of Type a Document.	
	N. when a f D.
	Number of Pages:
Document Date:	Number of Pages:
Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer	
Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer Signer's Name:	RIGHT THUMBPRINT
Capacity(ies) Claimed by Signer Signer's Name:	RIGHT THUMBPRINT OF SIGNER
Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s):	RIGHT THUMBPRINT OF SIGNER
Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s): Partner — Limited Li General	RIGHT THUMBPRINT OF SIGNER
Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s): Partner — Limited L. General Attorney in Fact	RIGHT THUMBPRINT OF SIGNER
Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s): Partner — Limited L. General Attorney in Fact Trustee	RIGHT THUMBPRINT OF SIGNER
Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s): Partner — It Limited In General Attorney in Fact Trustee Guardian or Conservator	RIGHT THUMBPRINT OF SIGNER Top of thumb here
Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s): Partner — Limited Li General Attorney in Fact Trustee	RIGHT THUMBPRINT OF SIGNER Top of thumb here