see attached toknowledgmen

Notary Public for Oregon My commission expires _

Returned at Counter

PUBLISHER'S NOTE: If using this form to convey real property subject to ORS 92.027, include the required reference

of

ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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 California	}
County of San Luis Obispo	}
01:-100-	Distance A. Davison Materia Bublic
i "V"	Richard A. Davega, Notary Public
personally appeared John WI.	Sterling
•	actory evidence to be the person(s) whose instrument and acknowledged to me that
· · · · · · · · · · · · · · · · · · ·	er/their authorized capacity(ies), and that by
	ent the person(s), or the entity upon behalf of
which the person(e) acted, executed the	e instrument.
Leadify under DENALTY OF DED HID	/ under the lower of the State of California that
the foregoing paragraph is true and con	/ under the laws of the State of California that
	RICHARD A DAVEGA
WITNESS my hand and official seal.	Comm. #2251018
VISA JON SAMM	Notary Public California n San Luis Obispo County
Notary Public Signature (N	otary Public Seal)
	• • • • • • • • • • • • • • • • • • •
ADDITIONAL OPTIONAL INFORMAT	INSTRUCTIONS FOR COMPLETING THIS FORM This form complies with current California statutes regarding notary wording and,
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Acknowledgents from other states may be completed for documents being sent to that state so long as the
Edgun - ML - Deed	wording does not require the California notary to violate California notary law.
(Title or description of attached document)	 State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which
(Title or description of attached document continued)	must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her
Number of Pages Document Date	commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of
	notarization.
CAPACITY CLAIMED BY THE SIGNER Individual (s)	 Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
☐ Corporate Officer	The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a
(Title)	sufficient area permits, otherwise complete a different acknowledgment form. • Signature of the notary public must match the signature on file with the office of
☐ Partner(s) ☐ Attorney-in-Fact	the county clerk. Additional information is not required but could help to ensure this
☐ Trustee(s)	acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date.
Other	Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
	 Securely attach this document to the signed document with a staple.