JURAT

State of Tennessee

County of _____ } ss.

Subscribed and sworn to (or affirmed) before me this

_____ day of _____, _____, by
Date *Month* *Year*

_____
Name of Signer No. 1

_____
Name of Signer No. 2 (if any)

_____
Signature of Notary Public

Betty Krachey, Notary Public; My commission expires 07/07/2027

Place Notary Seal/Stamp Above

Any Other Required Information
(Residence, Expiration Date, etc.)

OPTIONAL

This section is required for notarizations performed in Arizona but is optional in other states. Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____

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