

State of _____
County of _____

RHODE ISLAND NOTARY ACKNOWLEDGMENT

On this ____ day of _____, 20____, before me, _____ [Name of Notary Public], _____ [Name of Document Signer] personally appeared virtually/in person and known to me personally or proven to me through satisfactory evidence of identification, which was _____, to be the person whose name is subscribed to the preceding or attached document, and acknowledged to me that s/he signed it voluntarily for its stated purpose.

The signer is signing
(as partner for _____, a partnership)
(as _____ for _____, a corporation)
(as attorney in fact for _____, the principal)
(as an individual on behalf of himself or herself)
(as _____ for _____ (a) (the) _____)

The document being acknowledged is _____, dated _____, and consisting of _____ pages.

I certify under penalty of perjury under the laws of _____ that the foregoing paragraph is true and correct to the best of my knowledge.

WITNESS my hand and seal.

Notary Public Signature

Notary Printed Name

(SEAL)

Title/Rank, if applicable

Registration/Serial Number, Notary ID, or Bar Number (where applicable)

My Commission/Appointment Expires _____

The notary public completing this acknowledgement verifies only the identity of the individual who signed the document to which this certification is attached, and not to the truthfulness, accuracy, or validity of the document itself.

