SUPPORTING AFFIDAVIT & ACKNOWLEDGMENT

STATE OF)	
COUNTY OF) ss.	
	ned, a Notary Public, in and for said County and Sta-	
	sonally appeared	
	ne within and foregoing instrument and acknowledged to	
	ary act and deed for the uses and purposes therein set fort	
and year first above written.	F, I have hereunto set my official signature and affixed	my official seal the day
and year first above written.		
My Commission Expires:		
,		
	Notary Public	
	•	
	BENEFICIARY SIGNATURES	
Diagon have all		
Please nave all	beneficiaries who are listed above execute in the spaces	oelow
WITNESS:	BENEFICIARY:	
	Name:	
	Address:	
	City/State:	
WITNESS:	BENEFICIARY:	
WITHESS.		
	Name:	
	Address:	
	City/State:	
WITNESS:	BENEFICIARY:	
	Name:	
	Address:	
	City/State:	
WITNESS:	BENEFICIARY:	
	Name:	
	Address:	-
	City/State:	
WITNESS:	BENEFICIARY:	
	N.	
	9000000	
	Address:	
	C:L-/C1-1	