

**MINNESOTA NOTARIAL CERTIFICATE
(OATH OR AFFIRMATION)**

State of Minnesota
County of _____

Signed and sworn to (or affirmed) before me on _____ [date] by
_____ [name(s) of person(s)].

[Seal, if any]

[Signature of notarial officer]

[Title (and Rank)]

My Commission Expires: _____