

**WISCONSIN NOTARIAL CERTIFICATE
(VERIFICATION UPON OATH OR AFFIRMATION)**

State of Wisconsin

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: _____