

STATE OF MONTANA)
)ss.
County of Flathead)

This instrument was acknowledged before me on (insert date) by (name of signor)
as (their capacity to sign or company title) of (name of business or party on behalf of whom
the instrument is being executed).

(Insert Signor's Name)
(Title) for (Business)

Signed and sworn to before on this _____ day of August 26 by (name of person making the statement)

[Type, Stamp, or Print Name]

(Seal)

Notary Public for the State of _____
Residing at _____,
My commission expires _____, 20____