

WASHINGTON NOTARY VERIFICATION OF OATH OR AFFIRMATION

State of Washington

County of _____

Signed and sworn to (or affirmed) before me on _____ (Date) by
_____ (Name of Person Making Statement).

Date: _____

(Seal or Stamp)

Signature

Title

My commission expires: _____

Name of Document _____

Date of Document _____

Number of Pages _____