Alaska Notarial Certificates

(1) For an individual acting in the individual's own right:

State of ______ Judicial District (or County of ______ or Municipality of ______

On this _____ day of _____ in the year____, before me, the undersigned notary public, personally appeared: ______ known to me to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged that he/she/they executed the same for the purposes therein contained.

My Commission Expires:_____

Signature of Person Taking Acknowledgment Title or Rank Serial Number, if any

(Short form acknowledgment)

State of ______ Judicial District (or County of ______ or Municipality of ______

The foregoing instrument was acknowledged before me this _____(date) by (name of person who acknowledged).

My Commission Expires:_____

(2) For a corporation:

State of ______ Judicial District (or County of ______ or Municipality of ______ Signature of Person Taking Acknowledgment Title or Rank Serial Number, if any The foregoing instrument was acknowledged before me this _____date) by _____ ____ (name of officer or agent, title of officer or agent) of ______ (name of corporation acknowledging) a ______ (state or place of incorporation) corporation, on behalf of the corporation.

> Signature of Person Taking Acknowledgment Title or Rank Serial Number, if any

My Commission Expires:_____

(3) For a partnership:

State of ______ Judicial District (or County of ______ or Municipality of ______

The foregoing instrument was acknowledged before me this _____ (date) by _____ (name of acknowledging partner or agent), partner (or agent) on behalf of _____ (name of partnership), a partnership.

Signature of Person Taking Acknowledgment Title or Rank Serial Number, if any

My Commission Expires:_____

(4) For an individual acting as principal by an attorney in fact:

State of ______ Judicial District (or County of ______ or Municipality of ______

The foregoing instrument was acknowledged before me this _____ (date) by _____ (name of attorney-in-fact), as attorney-in-fact on behalf of _____ (name of principal).

Signature of Person Taking Acknowledgment My Commission Expires:_____

Title or Rank Serial Number, if any

(5) By a public officer, trustee, or personal representative:

State of ______ Judicial District (or County of ______ or Municipality of ______

The foregoing instrument was acknowledged before me this _____ (date) by _____ (name and title of position).

	Signature of Person Taking
	Acknowledgment
	Title or Rank
My Commission Expires:	Serial Number, if any

Jurat:

State of			
Judicial District (or County of			
or Municipality of			
Subscribed and sworn to before me this _	day of	in the year	

Signature of Officer Title of Officer Serial Number, if any

My Commission Expires:_____

Verification:

State of ______ Judicial District (or County of ______ or Municipality of ______

I hereby certify that on the _____day of _____, 20____, before me, _____ (notary's name), a notary public of the State of Alaska, personally appeared, ______(affiant's name) and made his/her oath/affirmation in due form of law that the matters and facts set forth in the ______(name of document) are true. As witness my hand and notarial seal.

My Commission Expires:_____

Signature of Officer Title of Officer Serial Number, if any

(Verification 2)

I ______ say on oath or affirm that I have read the foregoing (or attached) document and believe all statements made in the document are true.

Signature

Subscribed and sworn to or affirmed before me at_____ on _____ (date).

My Commission Expires:

Signature of Officer Title of Officer Serial Number, if any

Copy Certification by Document Custodian:

State of ______ Judicial District (or County of ______ or Municipality of ______

I, _____, hereby swear (or affirm) that the attached_____ (name of custodian of original document) reproduction of _____, is a true, correct and complete (description of original document with number of pages) photocopy of a document in my possession.

Signature and address of custodian of original document

Subscribed and sworn to before me this _____day of _____in the year_____.

My Commission Expires:_____

Signature of Officer Title of Officer Serial Number, if any