New Hampshire Notarial Certificates

Acknowledgments

For an individual acting in his own right:

State of New Hampshire County of _____

This instrument was acknowledged before me this _____ (date) by _____ (name[s] of person[s]).

(Seal, if any)

(Signature of notarial officer) Title (and Rank)

[My commission expires____]

For a corporation:

State of New Hampshire County of _____

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.

(Seal, if any)

(Signature of notarial officer) Title (and Rank)

[My commission Expires____]

For a partnership:

State of New Hampshire County 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.

(Seal, if any)

(Signature of notarial officer) Title (and Rank)

[My commission expires____]

For an individual acting as principal by an attorney in fact:

State of New Hampshire County 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).

(Seal, if any)

(Signature of notarial officer) Title (and Rank)

[My commission expires____]

By a person signing in representative capacity:

State of New Hampshire County of _____

This instrument was acknowledged before me this _____ (date) by _____ (name[s] of person[s]) as ______ (type of authority, e.g., officer, trustee, etc.) of ______ (name of party on behalf of whom instrument was executed).

(Seal, if any)

(Signature of notarial officer) Title (and Rank)

[My commission expires____]

For verification upon oath or affirmation:

| State of New Hampshire County of | | |
|---|---|-------------|
| Signed and sworn to (or affirmed) before me on _ of person(s) making statement)). | (date) by | (name(s) |
| (Seal, if any) | (Signature of notaria Title (and Rank) | l officer) |
| | [My commission expires |] |
| For witnessing or attesting a signature: | | |
| State of New Hampshire County of | | |
| Signed or attested before me on (date) | by (name(s) of pers | son(s)). |
| (Seal, if any) | (Signature of notaria Title (and Rank) | ll officer) |
| | [My commission expires |] |
| For attestation of a copy of a document: | | |
| State of New Hampshire County of | | |
| I certify that this is a true and correct copy of a do Dated | cument in the possession of | |
| (Seal, if any) | (Signature of notaria Title (and Rank) | l officer) |
| | [My commission expires |] |
| | | |