## **Iowa Notarial Certificates**

## For an acknowledgment in an individual capacity:

State of Iowa County of	
This instrument was acknowledged (name of person	before me on (date) by acknowledged).
(Stamp or Seal)	(Signature of notarial officer) Title (and Rank) My commission expires:
For an acknowledgment in a representa	ative capacity:
State of Iowa County of	
	before me on (date) by
	rson(s)) as (type of authority, e.g., ame of party on behalf of whom instrument was
(Stamp or Seal)	(Signature of notarial officer) Title (and Rank)
For a verification upon oath or affirma	My commission expires:
State of Iowa County of	
Signed and sworn to (or affirmed) before (name(s) of person(s) making statement).	me on (date) by
(Stamp or Seal)	(Signature of notarial officer) Title (and Rank)
	My commission expires:

## For witnessing or attesting a signature: State of Iowa County of \_\_\_\_\_ Signed or attested before me on \_\_\_\_\_\_ (date) by \_\_\_\_\_ (name(s) of person(s)). (Signature of notarial officer) (Stamp or Seal) Title (and Rank) My commission expires:\_\_\_\_\_ For attestation of a copy of a document: State of Iowa County of \_\_\_\_\_ I certify that this is a true and correct copy of a document in the possession of Dated\_\_\_\_ (Signature of notarial officer) (Stamp or Seal) Title (and Rank)

My commission expires:\_\_\_\_\_