

NEVADA CREDIBLE-WITNESS ACKNOWLEDGMENT
NRS 240.169

State of Nevada }
County of _____ } ss.

This instrument was acknowledged before me

on _____, _____, _____
Month Day Year

by _____,
Name of Signer No. 1

(and

_____,
Name of Signer No. 2 (if any)

who personally appeared before me and whose
identity I verified upon the oath of

_____,
Name of Credible Witness

a credible witness personally known to me and to
the person(s) who acknowledged this instrument
before me.

Place Notary Seal and/or Stamp Above

Signature of Notarial Officer

OPTIONAL

*Completing this information can deter alteration of the document or
fraudulent reattachment of this form to an unintended document.*

Description of Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____