#### **NEVADA PROOF OF EXECUTION BY SUBSCRIBING WITNESS ("WITNESS JURAT")** N.R.S. 240.1685

State of			
County of Ss.	On		. 20
	Month	, Da	y Year
	Name of Subscribing Witness personally appeared before me, whom I know to be the person who signed this jurat of a subscribing witness while under oath, and swears that he/she was present and witnessed		
	sign his/her name to the	e attached docum	ient.
	Signature of S	Subscribing Witne	ess
	Signed and sworn befo	re me on	
			by
	Month	Day	Year
	Name of Subscribing Witness		S
Place Notary Seal and/or Stamp Above	Signature	of Notary Public	
OF			
Completing this information ca fraudulent reattachment of th			
Description of Attached Document			
Title or Type of Document:			
Document Date:	Number of	Pages:	
Signer(s) Other Than Named Above:			

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## **Nevada Short-Form Jurat of Subscribing Witness**

The subscribing-witness certificate is used when a principal signer who cannot appear before the Notary directs a third party (the subscribing witness) to witness the principal's signing of a document and then to bring the signed document to the Notary for a proof of execution.

This witness signs (subscribes) on the same document and takes an oath or affirmation, pledging truthfulness, from the Notary. The witness should be personally known by the Notary, or identified by a credible witness whom the Notary personally knows.

In most states, a proof of execution by a subscribing witness is a legally acceptable substitute for an acknowledgment by the principal signer. It is *never* an acceptable substitute on a sworn document such as an

affidavit, which requires the principal to sign and take an oath in the Notary's presence.

A subscribing-witness certificate is often referred to as a "witness jurat," because the subscribing witness must be put under oath and sign the document. A subscribing witness is sometimes known as an "executing witness."

The optional section at the bottom can deter alteration of the document or fraudulent reattachment of this form to an unintended document. The insertions in this section are not required by law. Failure to fill out this section will not affect the validity of the certificate.

### Instructions:

**1 NAME OF COUNTY** where Notary performs notarization.

# **2 DATE OF NOTARIZATION.** Actual month, day and year in which subscribing witness appears before Notary.

S NAME OF SUBSCRIBING WITNESS appearing before Notary. Initials and spelling of name should agree with document and ID card signatures.

#### AME OF PRINCIPAL SIGNER not appearing before Notary. Initials and spelling should agree with name signed

Signature of subscribing

**WITNESS** exactly as name appears in space 3.

**MONTH/DAY/YEAR** in which subscribing witness appeared before the Notary to sign the certificate and take an oath or affirmation.

#### **7** NAME OF SUBSCRIBING

**WITNESS** appearing before Notary. Initials and spelling of name should agree with signature in space 5 and name in space 3.

**3** SIGNATURE OF NOTARY, exactly as name appears on Certificate of Appointment and in seal.

State of	Nevada	)			
	CILCO .	ss.	Tain las in 12		
County of	EIKU	J	on January 19 2011.		
			Beverly R. Smith		
0		<u>-</u>			
			personally appeared before me, whom I know to be the person who signed this jurat of a subscribing		
			witness while under oath, and swears that he/she was present and witnessed		
			Michael T. Smith		
			Name of Principal Sianer		
			sign his/her name to the attached document.		
			Beverly R. Smith		
			Signature of Subscribing Witness		
			Signed and sworn before me on		
			January 19 2017 by: Month Day Year		
		PAT R. JONES Notary Public, State of Nevada Appointment No. 12:3456-7	-		
6.8	Notary Public, State Appointment No. 12		Beverly R. Smith		
100	My Appt. Expires May 19, 2020		-		
Place Notary Seal and/or Stamp Above			Pat R. Jones		
Place	volury sear ana/or sit	JIIIP ADOVE	Signature of Notary Public		
			OPTIONAL		
			can deter alteration of the document or this form to an unintended document.		
Descriptio	n of Attached Docum	nent			
Title or Typ	oe of Document:	Dee	ed of Trust 10		
Document	7/17	/16 👩	Number of Pages: 4 12		
			No other signers		
Signer(s) O	ther Than Named Abo	ove:	NO UTILI SIGNUS		

**9 NOTARY SEAL IMPRINT,** clearly and legibly affixed.

**SPACES 10–13 ARE OPTIONAL.** Omission of information here will not affect the document's validity. However, completing these spaces can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**11 TITLE OR TYPE OF DOCUMENT** notarized, such as "Deed of Trust."

**(1)** DATE OF DOCUMENT notarized. Most but not all documents will have a date, usually at the top or following the signature. If none, insert "No Date."

DUMBER OF PAGES in the notarized document. This may point out fraudulent addition or removal of pages. Do not count the certificate as a page. However, the certificate will be regarded as a page by recording officials in assessing recording fees.

#### **B** SIGNER(S) OTHER THAN

**NAMED IN SPACE 3.** Since all signers might not be named on the same notarial certificate, insert name(s) of signer(s) here that appear(s) or will appear on other certificates — as many as space allows. If none, insert "No Other Signers."



#### ROSS & ASSOCIATES NOTARY PUBLICS DIRECT

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