



Debt Management Services Program
 500 James Robertson Parkway
 Nashville, TN 37243
 Tel: 615-741-1831 • Fax: 615-253-1692
<http://www.tn.gov/commerce/section/regulatory-boards>

CORPORATE ACKNOWLEDGEMENT

State or Province of _____
 County of _____

On this _____ day of _____, _____, before me
 _____ the undersigned officer, personally
 appeared _____ known personally to
 me to be the _____ (title) of the above named corporation and
 acknowledged that he/she, as an officer being authorized so to do, executed the foregoing
 instrument for the purposes therein contained, by signing the name of the corporation by himself
 as an officer.

IN WITNESS WHEREOF I have hereunto set my hand and official Seal

 Notary Public
 My Commission Expires: _____

INDIVIDUAL OR PARTNERSHIP ACKNOWLEDGMENT

State or Province of _____
 County of _____

On this _____ day of _____, _____, before me
 _____ the undersigned officer, personally
 appeared _____ to me personally known and
 known to me to be the same person(s) whose name(s) is (are) signed to the foregoing instrument,
 and acknowledged the execution thereof for the uses and purposes therein set forth.

IN WITNESS WHEREOF I have hereunto set my hand and official Seal

 Notary Public
 My Commission Expires: _____