Notarized Identity Verification

| PRINT NAME: | | | |
|--|-------------------------------|-------------|---|
| (1 | First Name, Middle Initial, L | ast Name) | _ |
| E-mail Address (optional): | | | |
| | | | |
| Address: | | | |
| | | | |
| City: | State: | _ Zip Code: | _ |
| I hereby represent that all abov | e information is true and ac | ccurate. | |
| Signature: | | _ | |
| (Sign in the F | Presence of a Notary) | | |
| State of | | | |
| County of | | | |
| I hereby certify that on this | day of | , 20 | |
| Personally appeared before m my presence, and presented the | | | |
| Driver's License or Govt. Id | dentification Card | | |
| U.S. Passport | | | |
| ☐ U.S. Military ID Card☐ State Identification Card | | | |
| Social Security Card | | | |
| ☐ Birth Certificate | | | |
| Other: | (provide description, |) | |
| | | | |
| | | | |
| | | | |
| Notary Public: | (Drint Marra) | | |
| | (Print Name) | | |
| My Commission Expires: | | | |
| | | | |
| Notary Public Signature: | | | |
| - | | | |
| | | | |

Reserved for Notary Seal