,, here	by swear (or affirm) that the foregoing
(attachment) is a true and complete photocopy ma	de by me of the document titled
Name of Original Document	
Signature of Document Custodian	Address
A notary public or other officer completing this certificate verifies document to which this certificate is attached, and not the truthful	
State of California)
County of	S.S.
Subscribed and owern to (or offirmed) before the a	n this day of
Subscribed and sworn to (or affirmed) before me o	nroved to me on the basis of
20, by	
Signature of Notary Public	
	Seal
For other required information (Notary Name, Commission No. etc.) OPTIONAL INFORM	NATION
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