SIGNING SOLUTION AFFIDAVIT OF IDENTITY

(PLEASE NOTE THAT THIS FORM IS ONLY NECESSARY IF YOU DO NOT HAVE AN ID TO SUBMIT WITH YOUR POA)

I, _____ (Full Name Printed) born _____ (Date of Birth) swear under the penalty of perjury that that my identity is as fore stated and is verified by the following witnesses or notary public. Furthermore I agree to indemnify and hold Signing Solutions harmless from any and all liabilities it may incur due to the reliance upon my statements.

_____
Signature

WITNESSES

We the undersigned Witnesses hereby STAND and Attest that the Declarant as seen above, signed this document on this _____ day of _____, 201__, of their Own Free Will, as witnessed by Our Signatures below:

_____	_____
First Witness Signature	Second Witness Signature
Address:_____	Address:_____
_____	_____
_____	_____

OR

JURAT

STATE OF _____)
) Scilicet
County of _____)

SUBSCRIBED TO before me this _____ day of _____, A.D. 201____, _____ a Notary, that _____, personally appeared and known to me to be the man whose name subscribed to the within instrument and acknowledged to be the same.

_____ Seal;

Notary Public in and for said State

My Commission expires; _____