**DELAWARE NOTARY ACKNOWLEDGMENT**

State of Delaware

County of [COUNTY]

This instrument was acknowledged before me on [DATE] (date) by [NAME OF SIGNER] (name(s) of person(s)).

(Seal, if any)

[\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](https://esign.com/)

Signature of notarial officer

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title (and Rank)

My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_