| Affidavit Acknowledgment | | | |
|-----------------------------------|--|------------------------|--|
| l, | , being duly sworn, depose and say as follows: | | |
| | | | |
| | | | |
| | | (Signature of Affiant) | |
| State of Arkansas | | | |
| County of | | | |
| Acknowledged before me, this | day of | , 20 | |
| In witness whereof I hereunto set | my hand and official seal. | | |
| | | | |
| Signature of Notary Public | | | |
| My commission expires: | | [Seal of Office] | |
| TVIY CONTINUSSION CAPITOS. | | | |

| Notary Acknowledgment | |
|--|------------------|
| State of Arkansas | |
| County of | |
| On this the day of, 20, before me, | , the |
| undersigned notary, personally appeared | known to me |
| (or satisfactorily proven) to be the person whose name(s) is/are subscribed to the w | ithin instrument |
| and acknowledged that he/she/they executed the same for the purposes therein con | ntained. |
| In witness whereof I hereunto set my hand and official seal. | |
| Signature of Notary Public [Seal of Office | ce] |
| My commission expires: | |

| I,, affirm that the above/ | attached is a true and perfect | copy of the original document |
|--|---------------------------------|-------------------------------|
| , presented to me by | on | · |
| | (Circultura of Afficial) | |
| | (Signature of Affiant) | |
| State of Arkansas | | |
| County of | | |
| On this the day of, 20, before me, _ undersigned notary, personally appeared | | |
| (or satisfactorily proven) to be the person whose name(| s) is/are subscribed to the wit | hin instrument |
| and acknowledged that he/she/they executed the same | for the purposes therein cont | rained. |
| In witness whereof I hereunto set my hand and official s | eal. | |
| Signature of Notary Public | | |
| | [Seal of Office | e] |

Affidavit Acknowledgment

My commission expires:_____

State of Arkansas County of ________, affirm that the above/attached is a true and perfect copy of the original document ______, presented to me by _______ on this ______ day of ______, 20____. Signature of Notary Public [Seal of Office]

Photocopy Acknowledgment

My commission expires:_____

Translator Affidavit I, ______, affirm that the above/attached is a true and perfect translation of the original document ______. (Translator's Signature) State of Arkansas County of _____ On this the ______, 20____, before me, ______, the undersigned notary, personally appeared ______ known to me (or satisfactorily proven) to be the person whose name(s) is/are subscribed to the within instrument and acknowledged that he/she/they executed the same for the purposes therein contained. In witness whereof I hereunto set my hand and official seal.

[Seal of Office]

Signature of Notary Public

My commission expires:_____