

# Notarized Identity Verification

PRINT NAME: \_\_\_\_\_  
(First Name, Middle Initial, Last Name)

E-mail Address (optional): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

I hereby represent that all above information is true and accurate.

Signature: \_\_\_\_\_ (Sign in the Presence of a Notary)

State of \_\_\_\_\_ County of \_\_\_\_\_

I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Personally appeared before me the signer and subject of the above form, who signed or attested to the same in my presence, and presented the following form of identification as proof of his or her identity:

U.S. Passport

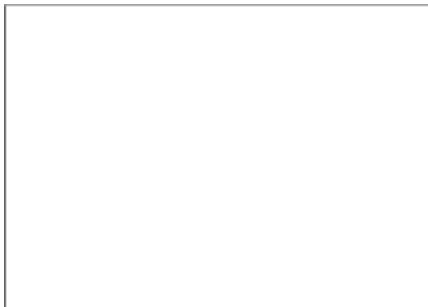
OR PICK TWO

- U.S. Military ID Card
- State Identification Card
- Social Security Card
- Birth Certificate
- Driver's License or Govt. Identification Card
- Other \_\_\_\_\_ (provide description)

Notary Public: \_\_\_\_\_ (Print Name)

My Commission Expires: \_\_\_\_\_

Notary Public Signature: \_\_\_\_\_



Reserved for Notary Seal