SHORT TERM POWER OF ATTORNEY ACKNOWLEDGMENT

State of	
County of	

On this day of	, personally appeared before me,
the said named	, to me known and known
to me to be the person described	in and who executed the foregoing instrument and
he/she acknowledged that he/she	executed the same and being duly sworn by me,
made oath that the statements in	the foregoing instrument are true.

Witness my hand and official seal, this the _____day of _____, 20____.

(Official Seal)

Official Signature of Notary

_____, Notary Public ______, Notary Public ______, Notary 's printed or typed name

My commission expires: _____

OPTIONAL		
This certificate is attached to a	, signed by Name of Principal Signer(s)	
on, and includes pages		