Application to Amend a Birth Record

Introduction

Use the Application to Amend a Birth Record (VS 24B) form to:

- **Amend a Birth Record** (See checklist on page 3)
  - Correct most typographical errors
  - Add diacritical marks beginning July 1, 2026
  - Correct the sex field, date, time, or place of birth of the child
  - Add a parent's new name after a court order or naturalization process
  - Correct parents' place or date of birth
- **Change Child's Sex Field to Reflect Gender Identity** (See checklist on page 7)
- **Change Parent Designation to Reflect Gender Identity on Child's Birth Certificate** (See checklist on page 11)

- Please see page 17 for a list of frequently asked questions and answers.
- For other amendment types, please visit the CDPH-VR website at www.cdph.ca.gov.

Mailing Address

Mail completed application and appropriate fee(s) to the address below:

CDPH – Vital Records
MS 5105
P.O. Box 997410
Sacramento, CA 95899-7410

- Amended certificates are mailed via USPS First Class and do not contain a tracking number.
- You may provide a self-addressed prepaid envelope that utilizes tracking with your request.

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Amend a Birth Record Checklist

Use this checklist to:

- Correct most typographical errors
- Add diacritical marks beginning July 1, 2026
- Correct the sex field, date, time, or place of birth of the child due to hospital or Local Registrar error
- Add a parent's new name after a court ordered name change
- Correct parents' place or date of birth

☐ Properly Completed VS 24B Form

- ☐ Applicant name and mailing address are completely filled out.
- ☐ Part 1 matches the current birth certificate.
- ☐ Part 2:
  - Lists item(s) to correct.
  - Lists reason for the correction.
    - *Ex*: If correcting *spelling of parent's name, "To correct parent's name to match their birth certificate*."
    - *Ex*: If the parent obtained a name change via court order or naturalization process and is adding their new name on the child's certificate, "*To add parent's court ordered name change pursuant to [court name], court case number, dated MM/DD/YYYY,*" or "*To add parent's name change following the naturalization process dated MM/DD/YYYY.*"
- ☐ Both signature fields are signed and dated:
  - If correcting hospital or Local Registrar error, one signature must be the physician, birthing hospital administrator, or representative of the Local Registrar.

☐ Required Documentation

Please provide the required document(s) that applies to the changes you are requesting for:

- ☐ A photocopy of the parent's birth certificate if correcting a typographical error on the name of child's parent.
- ☐ A photocopy of the child's social security card (number can be blacked out), ID, or passport showing correct spelling of the name if correcting a typographical error in the name.
- ☐ A certified copy of the parent's court order name change or photocopy of the naturalization certificate if adding parent's new name to the child's certificate. (See Certified Court Order Requirements on page 15).
- ☐ A photocopy of the child's birth certificate (optional).
- ☐ If documents are not written in English, must include a certified English translation.
- ☐ If you cannot provide the required documents, submit any available documents that support the changes you are requesting. We will notify you by letter if additional items are needed. Note: We are unable to approve the use of or review any documents other than those listed in the pamphlet prior to submission.

☐ Payment (See Appropriate Fees on page 15)

Check or money order in US dollars, made payable to CDPH Vital Records. **Do not send cash.**

☐ Completed Notarized Sworn Statement

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Form Instructions: Amend a Birth Record

Part 1

Must match the current certificate:

- It should show any incorrect information **as it appears** on the current record.
- If any of the information in Part 1 was **previously amended**, the changes must be reflected in Part 1 of the VS 24B form.

Example:

Part 1: Provide the following information so that CDPH-Vital Records can identify the original birth record. This should reflect how it appears now - before the correction. Please provide as much information as possible.		
First Name Michhael	Middle Name ---	Last Name Doe
Date of Birth 05/12/2005	City of Birth (if known) Sacramento	County of Birth Sacramento
Full Name of First Parent Mary Jane Smith	Full Name of Second Parent (if applicable) John --- Doe	

Part 2: Items to Correct

Check the item that needs to be changed and provide the new corrected name or value.

Example:

Part 2: Items to Correct - Leave items blank if no change is requested.			
Items To Change (commonly corrected items)			**Enter the New Corrected Name or Value**
Check the box to the right → if you want to change	✓	Child's First Name	Michael
		Child's Middle Name	
		Child's Last Name	
		Date of Birth	
	✓	Sex	Male
		1st Parent, First Name	
		1st Parent, Middle Name	
	✓	1st Parent, Last Name	Jones

Form Instructions: Amend a Birth Record (Continued)

Part 2: Reason for the Correction

The reason for the correction should state the change(s) being made and provide a reason.

- *Ex*: If correcting the **sex field, date, time, or place of birth** due to a hospital or Local Registrar error, "*To correct hospital error*," or "*To correct Local Registrar error."*
- *Ex*: If adding diacritical marks *"To add diacritical marks."*
- *Ex*: If adding a parent's new name after a **court order name change or naturalization process**, include the court name, court case number, and date, "*To add the mother's name change pursuant to Superior Court of California, County of Sacramento, Court Case Number CV 2022ABC, dated 04/05/2021*."
    - Note: Unless specified in the Name Change Order, an AKA (also known as) will not be added to the new name.

Example:

Enter the Reason for the Correction: ♦
To add the mother's name change pursuant to Superior Court of California, County of Sacramento, Court Case Number ABC12345, dated 04/05/2021.

Part 2: Signatures

Two people with personal knowledge of the facts must sign and complete this section.

- If correcting the **sex field, date, time, or place of birth** of the child **due to a hospital administrator or Local Registrar error**, one of the signers must be a hospital or Local Registrar representative
- If a hospital or Local Registrar representative are not available to sign, supporting documents may be submitted for review.
- The second signer may be one of the following:
    - The child, child's parent, legal guardian, or conservator

Example:

We, the undersigned, hereby certify under penalty of perjury that we have personal knowledge of the above facts and that the information above is true and correct.			
TWO persons must sign this form to correct a birth record	Signature of 1st Person ♦ *Janet Jackson*	Printed Name ♦ Janet Jackson	Relationship ♦ Birth Clerk
	Date Signed ♦ 05/04/2021	Address (Street and Number, City, State, and Zip) ♦ 4321 Columbus Drive, Sacramento, CA 95815	
	Signature of 2nd Person ♦ *Mary Jane Smith*	Printed Name ♦ Mary Jane Smith	Relationship ♦ Mother
	Date Signed ♦ 05/04/2021	Address (Street and Number, City, State, and Zip) ♦ 1234 Hyde Street, Sacramento, CA 95814	

End of "Form Instructions: Amend a Birth Record."

Change Child's Sex Field to Reflect Gender Identity Checklist

Use this checklist to change the sex listed on the child's birth certificate to female, male, or nonbinary to reflect gender identity and, if applicable, a court ordered name change.

Note: This is not the same as correcting the sex field due to a hospital or Local Registrar error.

☐ Properly Completed VS 24B Form

- ☐ Applicant name and mailing address are completely filled out.
- ☐ Part 1 matches the current birth certificate.
- ☐ Part 2 Lists items to correct
  - ☐ Lists reason for the correction.
    - *Ex*: If not using a court order, self-attest to change the sex listed on the birth certificate, "*To match the sex specified on my birth certificate to reflect my gender identity, and not for any fraudulent purposes.*"
    - *Ex*: If using a court order to change the sex listed (and name, if applicable) on the birth certificate, "*To match the sex specified on my birth certificate to reflect my gender identity and registrant name change pursuant to [court name], court case number, dated MM/DD/YYYY."*
  - ☐ If the registrant is under 18: Only one signature from the parent or legal guardian is required.
  - ☐ If the registrant is over 18: Only the individual correcting their gender on the birth certificate must sign in the signature section.

☐ Required Documentation

- ☐ A certified copy of the court order to change the sex listed to match gender identity if using a court order.
- ☐ A certified copy of the court ordered name change if changing the name at the same time as the sex field (See Certified Court Order Requirements on page 15).
- ☐ A photocopy of current birth certificate (optional).
- ☐ If documents are not written in English, must include a certified English translation.

☐ Payment (See Appropriate Fees on page 15)

Check or money order in US dollars, made payable to CDPH Vital Records. **Do not send cash.**

☐ Completed Notarized Sworn Statement

Form Instructions: Change Child's Sex Field to Reflect Gender Identity

Part 1:

Must match the current birth certificate, as outlined on page 4.

Part 2: Items to Correct

Check the item that needs to be changed and provide the new corrected name or value.

Example:

Part 2: Items to Correct - Leave items blank if no change is requested.			
Items To Change (commonly corrected items)			**Enter the New Corrected Name or Value**
Check the box to the right →	x	Child's First Name	Mary
	x	Child's Middle Name	Jane
		Child's Last Name	
		Date of Birth	
	x	Sex	Female
		1st Parent, First Name	

Part 2: Reason for the Correction

The reason for the correction should state the change(s) being made and provide a reason.

- *Ex*: "*To match the sex specified on my birth certificate to reflect my gender identity and not for any fraudulent purposes.*"

If changing the registrant's name at the same time the sex field is being changed, include the court name, court case number, and date. Note: Unless specified on the Name Change Order, an AKA (also known as) will not be added to the new name.

Example:

Enter the Reason for the Correction: ♦ To match the sex specified on my birth certificate to reflect my gender identity and not for any fraudulent purposes. Name is changed pursuant to Superior Court of California, County of Sacramento, Court Case Number 2022DEF, dated 04/05/2021.

Form Instructions: Change Child's Sex Field to Reflect Gender Identity (Continued)

Part 2: Signatures

- ☐ If the registrant is under 18: Only one signature from the parent or legal guardian is required.
- ☐ If the registrant is over 18: Only the individual correcting their gender on the birth certificate must sign in the signature section

Note: This is an exception to the two signatures required on the VS 24B form.

Example:

<table>
<tr><td colspan="4">We, the undersigned, hereby certify under penalty of perjury that we have personal knowledge of the above facts and that the information above is true and correct.</td></tr>
<tr><td rowspan="4">TWO persons must sign this form to correct a birth record</td><td>Signature of 1st Person ♦
Mary Jane Smith</td><td>Printed Name ♦
Mary Jane Smith</td><td>Relationship ♦
Self</td></tr>
<tr><td>Date Signed ♦
05/04/2021</td><td colspan="2">Address (Street and Number, City, State, and Zip) ♦
1234 Hyde Street, Sacramento, CA 95814</td></tr>
<tr><td>Signature of 2nd Person ♦</td><td>Printed Name ♦</td><td>Relationship ♦</td></tr>
<tr><td>Date Signed ♦</td><td colspan="2">Address (Street and Number, City, State, and Zip) ♦</td></tr>
</table>

End of "Form Instructions: Change Child's Sex Field to Reflect Gender Identity."

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Change Parent Designation to Reflect Gender Identity on Child's Birth Certificate Checklist

Use this checklist to change parent designation as mother, father, or parent on child's birth certificate to reflect the parent's gender identity and, if applicable, a court ordered name change.

☐ Properly Completed VS 24B Form

- ☐ Applicant name and mailing address are completely filled out.
- ☐ Part 1 matches the current birth certificate.
- ☐ Part 2:
  - Lists item(s) to correct.
  - Lists reason for the correction.
    - *Ex*: If NOT using a court order, self-attest to change parent designation on child's birth certificate, "*To change the parent designation to conform to my gender identity and is not for fraudulent purposes*."
    - *Ex*: If using a court order to change the parent designation (and name, if applicable) on child's birth certificate, "*To change the parent designation to conform to my gender identity and is not for fraudulent purposes and to change parent name pursuant to [court name], court case number, dated MM/DD/YYYY."*
- ☐ One of the signature fields must be signed and dated by the parent whose gender and sex identifier has been changed as mother, father, or parent. Note: This is an exception to the two signatures required on the VS 24B form.

☐ Required Documentation

- ☐ **At least one of the following:**
  - A certified copy of the court-ordered change of gender.
  - A photocopy of the parent's new birth certificate reflecting a change of gender and sex identifier.
  - A photocopy of the government-issued identity document reflecting the parent's change of gender and sex identifier.
  - An affidavit attesting under penalty of perjury that the request for a change of the designation of the petitioner is to conform to their gender identity and is not made for a fraudulent purpose. *(In lieu of a separate document, the parent may enter the self-attestation language in "reason for the correction" on the VS 24B form).*

AND (if applicable):

- ☐ A certified copy of the court-ordered name change (See Certified Court Order Requirements on page 15).
- ☐ If child is 18 years or older, a notarized letter stipulating to the change to the adult child's birth certificate. The letter must state, "*I, (adult child's full name)*, *stipulate to an issuance of a new birth certificate for me that reflects my parent's legal gender and name.*"
- ☐ If documents are not written in English, must include a certified English translation.

☐ Payment (See Appropriate Fees on page 15)

Check or money order in US dollars, made payable to CDPH Vital Records. **Do not send cash.**

☐ Completed Notarized Sworn Statement

Form Instructions: Change Parent Designation to Reflect Gender Identity on Child's Birth Certificate

Part 1:

Must match the current birth certificate, as outlined on page 4.

Part 2: Items to Correct

Check the item that needs to be changed and provide the new corrected name or value. If the item is not listed, provide a descriptive name of the item to be changed.

Example:

Part 2: Items to Correct - Leave items blank if no change is requested.			
Items To Change (commonly corrected items)			**Enter the New Corrected Name or Value**
Check the box to the right → if you want to change or correct this item		Child's First Name	
		Child's Middle Name	
		Child's Last Name	
		Date of Birth	
		Sex	
	x	1st Parent, First Name	Morgan
	x	1st Parent, Middle Name	Joe
		1st Parent, Last Name	
		1st Parent, Date of Birth	
		2nd Parent, First Name	
		2nd Parent, Middle Name	
		2nd Parent, Last Name	
		2nd Parent, Date of Birth	
Other Items Not Listed Above - Enter a descriptive name of the item to change.			**Enter the New Corrected Name or Value**
1st Parent Gender Designation - Mother			Parent

Part 2: Reason for the Correction

The reason for the correction should state the change(s) being made and provide a reason.

- *Ex*: "*To change the parent designation to conform to my gender identity and is not for fraudulent purposes.*"

If changing the parent's name at the same time the parent designation field is being changed, include the court name, court case number, and date. Note: Unless specified on the Name Change Order, an AKA (also known as) will not be added to the new name.

Example:

Enter the Reason for the Correction: ♦ To change the parent designation to conform to my gender identity and not for any fraudulent purposes. Name is changed pursuant to Superior Court of California, County of Sacramento, Court Case Number 2022GHI, dated 04/05/2021.

Form Instructions: Change Parent Designation to Reflect Gender Identity on Child's Birth Certificate (Continued)

Part 2: Signatures

Only the parent whose gender and sex identifier has been changed as mother, father, or parent is required in this section.

Note: This is an exception to the two signatures required on the VS 24B form.

Example:

<table>
<tr><td colspan="4">We, the undersigned, hereby certify under penalty of perjury that we have personal knowledge of the above facts and that the information above is true and correct.</td></tr>
<tr><td rowspan="4">TWO persons must sign this form to correct a birth record</td><td>Signature of 1st Person ♦
Morgan Joe Smith</td><td>Printed Name ♦
Morgan Joe Smith</td><td>Relationship ♦
Parent</td></tr>
<tr><td>Date Signed ♦
05/04/2021</td><td colspan="2">Address (Street and Number, City, State, and Zip) ♦
5678 Hyde Street, Sacramento, CA 95814</td></tr>
<tr><td>Signature of 2nd Person ♦</td><td>Printed Name ♦</td><td>Relationship ♦</td></tr>
<tr><td>Date Signed ♦</td><td colspan="2">Address (Street and Number, City, State, and Zip) ♦</td></tr>
</table>

End of "Form Instructions: Change Parent Designation to Reflect Gender Identity on Child's Birth Certificate."

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Certified Court Order Requirements (if applicable)

- ✓ Original court certification stamp and court seal with court clerk's signature (cannot be a photocopy).
- ✓ Contains an original stamp or statement with language similar to: "This is a true and correct copy of the original on file with the court."
- ✓ Judge's signature or signature stamp.
- ✓ Certified English translation (if applicable).
- ✓ For name changes, must state the name listed on the current birth certificate and list what the name is being changed to.

Appropriate Fees

Check or money order in US dollars, made payable to CDPH Vital Records. **Do not send cash.**

If submitting the amendment within one (1) year of child's date of birth:

- There is no fee to register the amendment and does not include a certified copy of the amended certificate.
- The fee is $31 per certified copy for the amended certificate.

If submitting the amendment one (1) year or more after the child's date of birth:

- The fee is $26 to register the amendment and includes one new amended certified copy of the certificate.
- Additional certified copies of the amended certificate are $31 each.

If submitting an amendment for any of the reasons below, there is a $26 fee (includes one certified copy of the amended certificate) regardless of date of birth:

Note: Additional certified copies of the amended certificate are $31 each.

- Correcting the sex field due to a hospital or Local Registrar error
- Changing child's sex field to reflect gender identity
- Changing parent designation to reflect gender identity on child's birth certificate

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Application to Amend a Birth Record

Frequently Asked Questions

Q: Where can I find application forms and informational pamphlets?

A: Application forms, including informational pamphlets for all amendment types, are located on the CDPH-VR Forms: Birth Death Marriage Certificates webpage. (www.cdph.ca.gov/Programs/PSB/Pages/BirthDeathMarriageCertificates.aspx)

Q: What is the current processing time?

A: Current processing times are listed on the CDPH-VR Processing Times webpage. (www.cdph.ca.gov/Programs/CHSI/Pages/Vital-Records-Processing-Times.aspx)

Q: Once the amendment is registered, what happens to the birth certificate?

A: Amendments become part of the original certificate, resulting in a multi-page certificate. You must keep the birth certificate with all amendments attached for the birth certificate to be valid. However, changes in gender or parentage and removing racial slurs will always result in a corrected one-page certificate.

Q: Will my supporting documents be returned?

A: Supporting documents, including sworn statements and courts orders, are not returned once the amendment is registered. Please keep copies of all documents submitted.

Q: How do I amend the record to add diacritical marks?

A: Please visit the Frequently Asked Questions Diacritical Marks - AB 64 web page regarding adding diacritical marks to vital records.

Q: Do you provide tracking information?

A: CDPH-VR sends certificates by USPS regular mail without tracking to the address provided on the application. If you would like tracking, please include a self-addressed, prepaid FedEx, UPS, or USPS envelope, and your certificate will be mailed using that envelope.

Q: What if I still have questions?

A: Please contact our Customer Service Unit by email at VitalRecordsHelp@cdph.ca.gov or telephone at (916) 445-2684.

For questions relating to gender changes per Assembly Bill (AB) 218, please visit the Frequently Asked Questions (FAQ) webpage (www.cdph.ca.gov/Programs/CHSI/Pages/Assembly-Bill-(AB)-218.aspx).

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Application to Amend a Birth Record (VS 24B)

Applicant Name and Mailing Address

Name: _____ Street: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Calculate the Fee

(this depends on the date of birth, use the appropriate table)

Within one year of date of birth	
Amendment Fee (amended copy not included)	$0
Fee for Copy of Amended Record ($31 each)	
Total Fee	

After one year of date of birth	
Amendment Fee (1 amended copy included)	$26
Fee for Additional Copies ($31 each)	
Total Fee	

For any of the following amendments, please use the "**After one year date of birth**" box above to calculate the fee:

- Correcting the sex field due to a hospital or Local Registrar error
- Changing child's sex field to reflect gender identity
- Changing parent designation to reflect gender identity on child's birth certificate

Please Read the Instructions Carefully

Step 1: Complete page 2 of this form and include information for all required fields.

Step 2: Complete and include a Notarized Sworn Statement (form VS 20) if you are requesting a copy of the amended record (this applies to most requests). A copy of this form is downloadable from: www.cdph.ca.gov (type VS 20 in the Search Field).

Step 3: Include a certified copy of the Court Order (if applicable). Please review the pamphlet to determine if you need a court order.

Step 4: Include a check or money order for fee calculated above. Make the check or money order payable to CDPH - Vital Records. **Do not send cash.**

Step 5: If you have any questions on how to complete these forms, please email your questions to VitalRecordsHelp@cdph.ca.gov before submitting your package.

Step 6: Mail all the items above to:

CDPH - Vital Records
MS 5105
P.O. Box 997410
Sacramento, CA 95899-7410



Items Marked with a Diamond (♦) are Required

Part 1: Provide the following information so that CDPH-Vital Records can identify the original birth record. This should reflect how it appears now - before the correction. Please provide as much information as possible.

First Name	Middle Name	Last Name
Date of Birth	City of Birth (if known)	County of Birth
Full Name of First Parent		Full Name of Second Parent (if applicable)

Part 2: Items to Correct - Leave items blank if no change is requested.

		Items To Change (commonly corrected items)	**Enter the New Corrected Name or Value**
Check the box to the right→ if you want to change or correct this item	☐	Child's First Name	
	☐	Child's Middle Name	
	☐	Child's Last Name	
	☐	Date of Birth	
	☐	Sex	
	☐	1st Parent, First Name	
	☐	1st Parent, Middle Name	
	☐	1st Parent, Last Name	
	☐	1st Parent, Date of Birth	
	☐	2nd Parent, First Name	
	☐	2nd Parent, Middle Name	
	☐	2nd Parent, Last Name	
	☐	2nd Parent, Date of Birth	

Other Items Not Listed Above - Enter a descriptive name and the incorrect name or value.	**Enter the New Corrected Name or Value**

Enter the Reason for the Correction: ♦

We, the undersigned, hereby certify under penalty of perjury that we have personal knowledge of the above facts and that the information above is true and correct.

TWO persons must sign this form to correct a birth record	Signature of 1st Person ♦	Printed Name ♦	Relationship ♦
	Date Signed ♦	Address (Street and Number, City, State, and Zip) ♦	
	Signature of 2nd Person ♦	Printed Name ♦	Relationship ♦
	Date Signed ♦	Address (Street and Number, City, State, and Zip) ♦	

VS24-S1

Sworn Statement Instructions

- Only one sworn statement is required for multiple records.
- Sworn statements are not required for informational copy requests.
- Authorized individuals must complete the top portion of the sworn statement by signing and identifying their relationship to person listed on certificate.
- Sworn statements must be notarized for authorized copy requests. **Law enforcement, governmental agencies, and funeral establishments (death records only) are exempt from the notary requirement, but must complete the top portion of the sworn statement page.**
- A sworn statement notarized by a foreign notary must have an apostille attached. Foreign notarizations obtained by an Ambassador, Minister, Consul, Vice Consul or Consular Agent of the United States, or from a Judge of Court of record having a seal in a foreign county do not require an apostille.

Relationship to Registrant

List of Authorized Persons:

- The registrant or a parent, legal guardian, child, grandparent, grandchild, sibling, spouse, or domestic partner of the registrant.
- A party entitled to receive the record as a result of court order or an attorney or licensed adoption agency seeking the birth record in order to comply with the requirements of Section 3140 or 7603 of the Family Code. (Please include a copy of the court order.)
- A member of a law enforcement agency or a representative of another governmental agency, as provided by law, who is conducting official business. (Companies representing a government agency must provide authorization from the government agency.)
- Any person or agency empowered by statute or appointed by a court to act on behalf of the registrant or the registrant's estate (Include a copy of the power of attorney or documentation identifying you as executor.)
- An attorney representing the registrant or the registrant's estate.
- Any agent or employee of a funeral establishment who acts within the course and scope of employment and on behalf of persons specified in HSC § 7100 (a) (1)-(8).
- Surviving next of kin (As specified in HSC § 7100).

Sworn Statement

I, _____, declare under penalty of perjury under the laws of the
(Applicant's Printed Name)

State of California, that I am an authorized person, as defined in California Health and Safety Code Section 103526 (c), and and am eligible to receive a certified copy of the birth, death, or marriage certificate of the following individual(s):

Registrant (Name of person whose certificate you are requesting)	**Applicant's Relationship to Registrant (Must be an authorized person)**

(*The remaining information must be completed in the presence of a Notary Public.)*

Subscribed to this _____day of _____, 20___, at _____, _____.
(Day) (Month) (City) (State)

_____
(**Applicant's** Signature)

Certificate of Acknowledgment

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of _____

County of _____

On _____before me, _____, personally appeared _____,
(Insert name and title of the officer)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct

_____
(Signature of Notary Public)

WITNESS my hand and official seal. (SEAL)

