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Pursuant to NRS 53.045, I declare under penalty of perjury that the forgoing is true and correct.

Dated this \_\_\_\_ day of \_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Email address