**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’s printed or typed name*

 My commission expires:

I signed this notarial certificate on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ according to the emergency video notarization

 *Date*

requirements contained in G.S. 10B-25.

Notary Public location during video notarization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County

Stated physical location of principal during video notarization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County

**OPTIONAL**

This certificate is attached to a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, signed by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Title/Type of Document Name of Principal Signer(s)*

on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , and includes \_\_\_\_\_\_\_\_\_\_ pages.

*Date # of pages*