

DECLARATION

This form is to be signed by the preparer of a document, and recorded with EACH document in accordance with IC 36-2-7.5 -5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do hereby affirm, under the penalties of perjury;

1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security numbers;
2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, the undersigned, affirm, under the penalties of perjury, that the foregoing declarations are true.



Lynnette M. Lannon
Signature of Declarant

LYNNETTE M. LANNON
Printed Name of Declarant