





DATE 9 - 30 - 2022		TIME am 9:15/11:15		Odometer 123/135	MILES 12	NOTARY FEE \$210.00	<input checked="" type="checkbox"/> Paid	<input checked="" type="checkbox"/> Adv. Travel	<input checked="" type="checkbox"/> Rush	<input type="checkbox"/> Copies	<input type="checkbox"/> Other	1				
CLIENT / Signing Service Christina Adams		ADDRESS Signing: <input checked="" type="checkbox"/> Same as Signer 1 Property: 2 4		LOAN #		LENDER		Tracking # 22-09-301234		<input checked="" type="checkbox"/> Paper <input type="checkbox"/> RON <input type="checkbox"/> Electronic						
Signers				DOCUMENTS SIGNED				Signers				DOCUMENTS SIGNED				
#4	#3	#2	#1	Affidavits				#4	#3	#2	#1	Agreements				
A J	A J	A J	A J	<input type="checkbox"/> ALTA / Statement				A J	A J	A J	A J	<input type="checkbox"/> Compliance / Errors & Omissions ("E&O")				
A J	A J	A J	A J	<input type="checkbox"/> Borrower / Owner				A J	A J	A J	A J	<input type="checkbox"/> Correction (Doc) / Ltd Power of Attorney				
A J	A J	A J	A J	<input type="checkbox"/> Closing / Agreement: Buyer / Seller				A J	A J	A J	A J	<input type="checkbox"/> Document Correction / Re-Execution				
A J	A J	A J	A J	<input type="checkbox"/> Common Identity / Certificate				A J	A J	A J	A J	<input type="checkbox"/> Encroachment / Release & Hold Harmless				
A J	A J	A J	A J	<input type="checkbox"/> Debts / Liens / Possession				A J	A J	A J	A J	<input type="checkbox"/> Errors & Omissions ("E&O") Compliance				
A J	A J	A J	A J	<input type="checkbox"/> Gap / Indemnity Agreement				A J	A J	A J	A J	<input type="checkbox"/> Indemnity / Hold Harmless				
A J	A J	A J	A J	<input type="checkbox"/> Homeowners Association / No HOA				A J	A J	A J	A J	<input type="checkbox"/> Loan Modification				
A J	A J	A J	A J	<input type="checkbox"/> Home Equity Compliance				A J	A J	A J	A J	<input type="checkbox"/> Mineral Rights				
A J	A J	A J	A J	<input type="checkbox"/> Home Equity Loan Refinance				A J	A J	A J	A J	<input type="checkbox"/> Renewal & Extension / Rider				
A J	A J	A J	A J	<input type="checkbox"/> Homestead / Non-Homestead				A J	A J	A J	A J	<input type="checkbox"/> Subordination				
A J	A J	A J	A J	<input type="checkbox"/> Identity / Proof of Identification				A J	A J	A J	A J	<input type="checkbox"/> Tax Proration				
A J	A J	A J	A J	<input type="checkbox"/> Marital Status				A J	A J	A J	A J	<input type="checkbox"/> Condominium Rider				
A J	A J	A J	A J	<input type="checkbox"/> Mortgagor's / Occupancy / Residency				A J	A J	A J	A J	<input type="checkbox"/> Deed: Grant / Quitclaim / Warranty				
A J	A J	A J	A J	<input type="checkbox"/> Name / One and the Same Person				A J	A J	A J	A J	<input type="checkbox"/> Deed of Trust / First Lien / Mortgage				
A J	A J	A J	A J	<input type="checkbox"/> No Mortgage / No Deed of Trust				A J	A J	A J	A J	<input type="checkbox"/> Disbursement / Distribution of Proceeds				
A J	A J	A J	A J	<input type="checkbox"/> Non-Applicant / Non-Borrower				A J	A J	A J	A J	<input type="checkbox"/> Notice of Penalties				
A J	A J	A J	A J	<input type="checkbox"/> Non-Foreign Status Certificate				A J	Other	A J	A J	<input type="checkbox"/> Notice of Penalties for False Statement				
A J	A J	A J	A J	<input type="checkbox"/> Occupancy / Financial Status				A J	A J	A J	A J	<input type="checkbox"/> Notice to Purchaser of Real Property				
A J	A J	A J	A J	<input type="checkbox"/> Owner & Indemnity Agreement				A J	A J	A J	A J	<input type="checkbox"/> Promissory Note / Note Payable				
A J	A J	A J	A J	<input type="checkbox"/> Payoff: Line of Credit / Mortgage				A J	A J	A J	A J	<input type="checkbox"/> Statement of Authority				
A J	A J	A J	A J	<input type="checkbox"/> Property Value				A J	A J	A J	A J	<input type="checkbox"/> Title Co Disclosure Residential Closing				
A J	A J	A J	A J	<input type="checkbox"/> Refinance				A J	A J	A J	A J	<input type="checkbox"/> Wire Transfer Request / Instructions				
A J	A J	A J	A J	<input type="checkbox"/> Signature / Name / AKA Statement				A J	A J	A J	A J	<input checked="" type="checkbox"/> Advance Health Care Directive				
A J	A J	A J	A J	<input type="checkbox"/> Survey / Hold Harmless / Indemnity				A J	A J	A J	A J	<input checked="" type="checkbox"/> Affidavit of Death: Joint Tenant / Trustee				
A J	A J	A J	A J	<input type="checkbox"/> Survey: In Lieu of / No Change				A J	A J	A J	A J	<input type="checkbox"/> Affidavit of Successor Trustee / Change				
A J	A J	A J	A J	<input type="checkbox"/> Survey Waiver: Buyer / Seller				A J	A J	A J	A J	<input checked="" type="checkbox"/> Assignment of Digital Assets				
A J	A J	A J	A J	<input type="checkbox"/> T-47 Residential Real Property				A J	A J	A J	A J	<input checked="" type="checkbox"/> Assignment of Personal Property				
A J	A J	A J	A J	<input type="checkbox"/> Tax: Income / Transfer				A J	A J	A J	A J	<input type="checkbox"/> Authorization for Final Disposition				
A J	A J	A J	A J	<input type="checkbox"/> Title / Seller				A J	A J	A J	A J	<input type="checkbox"/> Community Property Acceptance Affidavit				
A J	A J	A J	A J	<input type="checkbox"/> Identity Theft Affidavit / Complaint				A J	A J	A J	A J	<input checked="" type="checkbox"/> Deed: Gift / Interspousal / Trust Transfer				
A J	Personal	A J	A J	<input type="checkbox"/> Mail Delivery thru Agent Application				A J	A J	A J	A J	<input checked="" type="checkbox"/> HIPAA Release: Authz'n re Health Info				
A J	A J	A J	A J	<input type="checkbox"/> Safe Deposit Box Content Verification				A J	Estate Plans				<input type="checkbox"/> Personal Property Collection Affidavit			
A J	A J	A J	A J	<input type="checkbox"/> Unclaimed Property Form				A J	A J	A J	A J	<input type="checkbox"/> Personal Property Memorandum				
A J	A J	A J	A J	<input type="checkbox"/> Minor Medical Consent				A J	A J	A J	A J	<input checked="" type="checkbox"/> Power of Attorney: Durab / General / Ltd				
A J	Minors	A J	A J	<input type="checkbox"/> Minor Passport Consent				A J	A J	A J	A J	<input type="checkbox"/> Power of Attorney: Health / Living Will				
A J	A J	A J	A J	<input checked="" type="checkbox"/> Minor Travel Consent				A J	A J	A J	A J	<input type="checkbox"/> Small Estate Affidavit / Petition				
A J	A J	A J	A J	<input type="checkbox"/> Temporary Guardianship Agreement				A J	A J	A J	A J	<input type="checkbox"/> Transfer-on-Death (TOD) Deed / Affidavit				
A J	A J	A J	A J	<input type="checkbox"/> Vehicle Duplicate Title				A J	A J	A J	A J	<input checked="" type="checkbox"/> Trust: Irrev / Rev / Amended / Restated				
A J	Vehicles	A J	A J	<input type="checkbox"/> Vehicle Lien Release				A J	A J	A J	A J	<input checked="" type="checkbox"/> Trust Certification / Affidavit				
A J	A J	A J	A J	<input type="checkbox"/> Vehicle Odometer / VIN Verification				A J	A J	A J	A J	<input checked="" type="checkbox"/> Trustee Acceptance / Resignation				
A J	A J	A J	A J	<input type="checkbox"/> Vehicle Title Transfer / Bill of Sale				A J	A J	A J	A J	<input type="checkbox"/> Will / LW&T / Self-proving Affidavit				
Notarial Act				Date		EXTRA DOCUMENTS				Signers #1 #2 #3 #4						
A J O/A CC SW P O				- -20						<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
A J O/A CC SW P O				- -20						<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
A J O/A CC SW P O				- -20						<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
A J O/A CC SW P O				- -20						<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
A J O/A CC SW P O				- -20						<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
A J O/A CC SW P O				- -20						<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
A J O/A CC SW P O				- -20						<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						

A – Acknowledgment J – Jurat O/A – Oath/Affirmation CC – Copy Certification SW – Signature Witnessing P – Protest O – Other

Notary Name (printed): **Natalie Notary**

vi

Notary Commission #: **203300003**

<input checked="" type="checkbox"/> SATISFACTORY EVIDENCE <input checked="" type="checkbox"/> DL <input type="checkbox"/> P <input type="checkbox"/> State <input type="checkbox"/> Mil <input type="checkbox"/> Gov <input type="checkbox"/> Trib <input type="checkbox"/> Inm <input type="checkbox"/> Other or <input type="checkbox"/> Credible Witness OR <input type="checkbox"/> Pers Knowl			
SIGNER 1	NAME: <u>Matthew A. Miller</u> ADDRESS: <u>123 Maple Street</u> <u>Houston, TX 77001</u> PHONE C/H/W: <u>713/555-1111</u> NOTES: <u>husband & wife (signers 1 & 2)</u>	<input checked="" type="checkbox"/> Capacity <input checked="" type="checkbox"/> Voluntary <input checked="" type="checkbox"/> Proper ID # <u>10003579</u> AGENCY: <u>TX</u> <input checked="" type="checkbox"/> DMV <input type="checkbox"/> US State Dept Issued: <u>7/5/20</u> Expires: <u>7/5/26</u>	Fingerprint  R T I M R P L
	DATE: <u>9/21/2024</u> TIME: <u>9:32</u> ^{am} _{pm}	SIGNATURE: <u>Matthew A. Miller</u> <input checked="" type="checkbox"/> (oath/affirmation, if any) <input type="checkbox"/> (by Mark)	
<input checked="" type="checkbox"/> SATISFACTORY EVIDENCE <input type="checkbox"/> DL <input checked="" type="checkbox"/> P <input type="checkbox"/> State <input type="checkbox"/> Mil <input type="checkbox"/> Gov <input type="checkbox"/> Trib <input type="checkbox"/> Inm <input type="checkbox"/> Other or <input type="checkbox"/> Credible Witness OR <input type="checkbox"/> Pers Knowl			
SIGNER 2 / WITNESS	NAME: <u>Christina A. Adams</u> ADDRESS: <u>777 Euclid Avenue</u> <u>Fort Lauderdale, FL 33301</u> PHONE C/H/W: <u>954/555-1234</u> NOTES: <u>travel consent for her 16yo son Timothy</u>	<input type="checkbox"/> Witness <input type="checkbox"/> Credible <input type="checkbox"/> P/Known <input checked="" type="checkbox"/> Capacity <input checked="" type="checkbox"/> Voluntary <input checked="" type="checkbox"/> Proper ID # <u>123456789</u> AGENCY: <input type="checkbox"/> DMV <input checked="" type="checkbox"/> US State Dept Issued: <u>7/5/16</u> Expires: <u>7/5/26</u>	Fingerprint  R T I M R P L
	DATE: <u>9/21/2024</u> TIME: <u>10:38</u> ^{am} _{pm}	SIGNATURE: <u>Christina A. Adams</u> <input checked="" type="checkbox"/> (oath/affirmation, if any) <input type="checkbox"/> (by Mark)	
<input type="checkbox"/> SATISFACTORY EVIDENCE <input type="checkbox"/> DL <input type="checkbox"/> P <input type="checkbox"/> State <input type="checkbox"/> Mil <input type="checkbox"/> Gov <input type="checkbox"/> Trib <input type="checkbox"/> Inm <input type="checkbox"/> Other or <input type="checkbox"/> Credible Witness OR <input type="checkbox"/> Pers Knowl			
SIGNER 3 / WITNESS	NAME: _____ ADDRESS: _____ PHONE C/H/W: _____ NOTES: _____	<input type="checkbox"/> Capacity <input type="checkbox"/> Voluntary <input type="checkbox"/> Proper ID # _____ AGENCY: <input type="checkbox"/> DMV <input type="checkbox"/> US State Dept Issued: _____ Expires: _____	Fingerprint  R T I M R P L
	DATE: ____/____/20 TIME: ____:____ am/pm	SIGNATURE: _____ <input type="checkbox"/> (oath/affirmation, if any) <input type="checkbox"/> (by Mark)	
<input type="checkbox"/> SATISFACTORY EVIDENCE <input type="checkbox"/> DL <input type="checkbox"/> P <input type="checkbox"/> State <input type="checkbox"/> Mil <input type="checkbox"/> Gov <input type="checkbox"/> Trib <input type="checkbox"/> Inm <input type="checkbox"/> Other or <input type="checkbox"/> Credible Witness OR <input type="checkbox"/> Pers Knowl			
SIGNER 4 / WITNESS	NAME: _____ ADDRESS: _____ PHONE C/H/W: _____ NOTES: _____	<input type="checkbox"/> Capacity <input type="checkbox"/> Voluntary <input type="checkbox"/> Proper ID # _____ AGENCY: <input type="checkbox"/> DMV <input type="checkbox"/> US State Dept Issued: _____ Expires: _____	Fingerprint  R T I M R P L
	DATE: ____/____/20 TIME: ____:____ am/pm	SIGNATURE: _____ <input type="checkbox"/> (oath/affirmation, if any) <input type="checkbox"/> (by Mark)	
Transaction: <input type="checkbox"/> Cash <input type="checkbox"/> Commercial <input type="checkbox"/> HELOC <input type="checkbox"/> Loan Modification <input type="checkbox"/> Piggyback <input type="checkbox"/> Purchase & Sale <input type="checkbox"/> Refi <input type="checkbox"/> Reverse Mrtg <input checked="" type="checkbox"/> Other <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <u>estate plan & minor travel consent</u>			
Record: <input type="checkbox"/> Private <input type="checkbox"/> Public Total # of Notarial Acts: <u>21</u>			
<u>Christina's address is NOT to be disclosed to the public due to domestic violence by her former husband.</u>			
NOTES: <input type="checkbox"/> Document <input type="checkbox"/> ID <input type="checkbox"/> Signer: 1 <u>2</u> 3 4 <input type="checkbox"/> Extra Attendees <input type="checkbox"/> Follow-Up <input type="checkbox"/> Inspect / Copy Request <input type="checkbox"/> Stop <input type="checkbox"/> Other			
DL – Driver's License P – Passport State – State ID Mil – Military ID Gov – Government ID Trib – Tribal ID Inm – Inmate ID Other – Other ID Pers Knowl – Notary's Personal Knowledge of Signer vii P/Known – Credible Witness Personally Known by Notary			