





<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 1	NAME: Jonathon L. Smith ADDRESS: 123 Maple Street, Phoenix, AZ 85001 PHONE C/H/W: 602/555-1111 NOTES: husband & wife (signers 1 & 2)	<input checked="" type="checkbox"/> Capacity <input checked="" type="checkbox"/> Voluntary <input checked="" type="checkbox"/> Proper ID # 123456789 AGENCY: <input type="checkbox"/> DMV / MVD / BMV <input checked="" type="checkbox"/> US State Dept Issued: 7/5/16 Expires: 7/5/26 DATE: 9/30/2022 TIME: 9:32 am	Fingerprint:  SIGNATURE: <input checked="" type="checkbox"/> (oath/affirmation, if any) <input type="checkbox"/> (by Mark) Jonathon L. Smith
	<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		
	NAME: Jane M. Smith ADDRESS: 123 Maple Street, Phoenix, AZ 85001 PHONE C/H/W: 602/555-1111 NOTES: burn accident (thumbprints)	<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 # D12345678 AGENCY: <input type="checkbox"/> DMV / MVD / BMV <input checked="" type="checkbox"/> US State Dept Issued: 3/1/22 Expires: 3/1/27 DATE: 9/30/2022 TIME: 10:01 am	Fingerprint:  SIGNATURE: <input checked="" type="checkbox"/> (oath/affirmation, if any) <input type="checkbox"/> (by Mark) 2 Jane M. Smith
	<input checked="" 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 checked="" type="checkbox"/> Credible Witness OR <input type="checkbox"/> Pers Knowl		
SIGNER 3 / WITNESS	NAME: Roberta Smith-Adams ADDRESS: 2468 Park Street #10, Reno, NV 89433 PHONE C/H/W: 775/555-1515 NOTES: purse theft (ID) separated daughter (of signers 1&2)	<input type="checkbox"/> Witness <input type="checkbox"/> Credible <input type="checkbox"/> P/Known <input checked="" type="checkbox"/> Capacity <input checked="" type="checkbox"/> Voluntary <input type="checkbox"/> Proper ID # AGENCY: <input type="checkbox"/> DMV / MVD / BMV <input type="checkbox"/> US State Dept Issued: Expires: DATE: 9/30/2022 TIME: 10:27 am	Fingerprint:  SIGNATURE: <input checked="" type="checkbox"/> (oath/affirmation, if any) <input type="checkbox"/> (by Mark) 3 Roberta Smith-Adams
	<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		
	NAME: Christopher T. Jones ADDRESS: 777 Euclid Avenue, Fort Lauderdale, FL 33301 PHONE C/H/W: 954/555-1234 NOTES: friend Chris referred his girlfriend (signer 3)	<input checked="" type="checkbox"/> Witness <input checked="" type="checkbox"/> Credible <input checked="" type="checkbox"/> P/Known <input checked="" type="checkbox"/> Capacity <input checked="" type="checkbox"/> Voluntary <input checked="" type="checkbox"/> Proper ID # D123-456-77-789-0 AGENCY: <input type="checkbox"/> DMV / MVD / BMV <input type="checkbox"/> US State Dept Issued: 4/18/20 Expires: 4/18/28 DATE: 9/30/2022 TIME: 10:56 am	Fingerprint:  SIGNATURE: <input checked="" type="checkbox"/> (oath/affirmation, if any) <input type="checkbox"/> (by Mark) 4 Christopher T. Jones
	<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		
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 checked="" type="checkbox"/> Refi <input type="checkbox"/> Reverse Mrtg <input type="checkbox"/> Other <input checked="" type="checkbox"/> Buyer <input type="checkbox"/> Seller			
Record: <input checked="" type="checkbox"/> Private <input type="checkbox"/> Public Total # of Notarial Acts: 37 Roberta's address is NOT to be disclosed to public (domestic violence by current husband).			
NOTES: <input type="checkbox"/> Document <input type="checkbox"/> ID <input checked="" type="checkbox"/> Signer: 1 2 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			