

**PENNSYLVANIA INDIVIDUAL ACKNOWLEDGMENT**

State of Pennsylvania

County of \_\_\_\_\_

This record was acknowledged before me on \_\_\_\_\_ by \_\_\_\_\_  
*Date Name(s) of Individual(s)*

\_\_\_\_\_  
*Signature of Notarial Officer*

\_\_\_\_\_  
*Printed Name of Notarial Officer*

\_\_\_\_\_  
*Title of Office*

My Commission Expires: \_\_\_\_\_

*Place Official Stamp/Notary Seal Above*

**OPTIONAL**

*Completing this information can deter alteration of the document or  
fraudulent reattachment of this form to an unintended document.*

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

# Pennsylvania Individual Acknowledgment

The Individual Acknowledgment certificate is used when an individual is signing and acknowledging on his or her own behalf.

The optional section at the bottom can deter alteration of the document

or fraudulent reattachment of this form to an unintended document. The insertions in this section are not required by law. Failure to fill out this section will not affect the validity of the certificate.

## Instructions:

- 1 **NAME OF COUNTY** where Notary performs notarization.
- 2 **DATE OF NOTARIZATION.** Actual day, month and year in which signer appears before Notary.
- 3 **NAME OF PRINCIPAL SIGNER(S)** appearing before Notary. Initials and spelling of name(s) should agree with name(s) signed on document and ID card. Line through any remaining space.
- 4 **SIGNATURE OF NOTARIAL OFFICER,** exactly as name appears on commissioning papers and in seal.
- 5 **PRINTED NAME OF NOTARIAL OFFICER.** If the Notarial Officer's signature is illegible, the Notarial Officer must print their name below their signature.
- 6 **TITLE OF OFFICE,** of person notarizing document. In the case of a Notary, "Notary Public" would be the title.
- 7 **COMMISSION EXPIRATION DATE** of Notarial Officer, exactly as it appears on commissioning papers.
- 8 **OFFICIAL STAMP/NOTARY SEAL IMPRINT** clearly and legibly affixed.

### SPACES 9-12 ARE OPTIONAL.

Omission of information here will not affect the document's validity. However, completing these spaces can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

- 9 **TITLE OR TYPE OF DOCUMENT** notarized, such as "Deed of Trust."
- 10 **DATE OF DOCUMENT** notarized. Most but not all documents will have a date, usually at the top or following the signature. If none, insert "No Date."
- 11 **NUMBER OF PAGES** in the notarized document. This may point out fraudulent addition or removal of pages. Do not count the certificate as a page. However, the certificate will be regarded as a page by recording officials in assessing recording fees.
- 12 **SIGNER(S) OTHER THAN NAMED IN SPACE 3.** Since all signers might not be named on the same notarial certificate, insert name(s) of signer(s) here that appear(s) or will appear on other certificates – as many as space allows. If none, insert "No Other Signers."

**PENNSYLVANIA INDIVIDUAL ACKNOWLEDGMENT**

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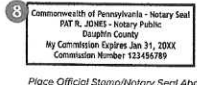
State of Pennsylvania  
 County of Westmoreland 1

This record was acknowledged before me on February 10, 20XX by Michael T. Smith 2 3  
Date Name(s) of Individual(s)

4 Pat R. Jones  
Signature of Notarial Officer

5 Pat R. Jones  
Printed Name of Notarial Officer

6 Notary Public  
Title of Office

8  8  
Place Official Stamp/Notary Seal Above

My Commission Expires: January 31, 20XX 7

**OPTIONAL**

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Grant Deed 9

Document Date: January 31, 20XX 10 Number of Pages: 1 11

Signer(s) Other Than Named Above: None 12

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