_____
Scott Alan Klasky's signature

8219 Dampier Circle
Liverpool, New York 13090

State of _____

County of _____

On _____ before me, _____, personally appeared Scott Alan Klasky, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.

Signature _____ ____Known ____Produced ID
Affiant Type of ID _____

(Seal)