

SAN JUAN SOUTHERN PAIUTE TRIBAL COURT

Mailing – Attn: Kalka 7760 E. State Rd 69, Ste C5-224 Prescott Valley, AZ 86314 Physical – Admin Office 50 S. Main Street, Ste #102 Tuba City, AZ 86045



Ph (928) 326-2955

tribalcourt@sanjuanpaiute-nsn.gov

Fax (888) 428-3990

INSTRUCTIONS FOR THE NOTARY ACKNOWLEDGMENT FORM

Purpose:

This is a generic form that may be used by an Arizona Notary Public to notarize a document. A court may require a notarized signature to verify the identity of the person signing a document before it is presented to the court.

How:

Bring the document you need to have notarized along with a copy of this form to the notary public. The notary will require you to present identification. Do not sign the document until the notary public says to do so.

Once the form is notarized and the acknowledgment filled out, both must be submitted to the Court for filing via one of the following:

- 1) E-mail E-mailed to tribalcourt@sanjuanpaiute-nsn.gov
- 2) Tribal Administration Office Scan at the Tribal Admin office, in the <u>Conference Room</u>, with the Self-Help Scanning Station and it will be sent directly to the Court Clerk:

Tribal Administration Office 50 S. Main Street Suite 102 Tuba City, AZ 86045

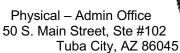
- 3) **Tribal Court Website** Upload to the Tribal Court's website from any computer with internet access, click 'Secure File Upload' and follow the directions from there: https://www.sanjuanpaiute-nsn.gov/departments/tribal-court#forms
- 4) **Fax** Fax to the number below: (888) 428-3990
- 5) Mail Mail to the address below:

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ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

THE STATE OF	, COU	UNTY OF	
On	20 before me,	(insert name and title of the officer)	
within the (print name o and acknowledged to m his/her/their signature(s	f document)e that he/she/they executed) on the instrument the person	the same in his/her/their authorized capacity(i son(s), or the entity upon behalf of which the Y OF PERJURY under the laws of the State of	ies), and that by person(s) acted
	•	paragraph is true and correct. WITNESS my h	
Given under my hand an	nd seal of office, this day of	, 20	
SEAL:		Signature:	