



DEPARTMENT of AGRICULTURE and NATURAL RESOURCES
Minerals, Mining, and Superfund Program
221 Mall Drive, Suite #201, Rapid City, SD 57701
Telephone: 605-773-4201, FAX: 605-394-5317

SUPPLEMENT TO FORM 3

ACKNOWLEDGMENT OF PRINCIPAL

State of _____)
) ss
County of _____)

BOND NO. _____

(COMPLETE APPLICABLE SECTION)

(Individual)

On this _____ day of _____, 20____, before me personally appeared _____, known to me to be the individual described in and who executed the foregoing instrument and acknowledged to me that he/she executed the same.

(Partnership—use additional supplement sheet(s) for acknowledgment of each partner)

On this _____ day of _____, 20____, before me personally appeared _____, who acknowledged himself/herself to be one of the partners of _____, a partnership, and that he/she, as such partner, being authorized so to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the partnership by himself/herself as a partner.

(Corporation)

On this _____ day of _____, 20____, before me personally appeared _____, who acknowledged himself/herself to be the _____ of _____, a corporation, and that he/she, as such _____ being authorized so to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation by himself/herself as _____.

(LLC)

On this _____ day of _____, 20____, before me personally appeared _____, who acknowledged himself/herself to be the _____ of _____, a limited liability company, and that he/she in such capacity, being authorized to do so, executed the foregoing instrument for the purposes therein contained, by signing the name of the limited liability company by himself/herself as _____.

IN WITNESS WHEREOF, I hereunto subscribed my name and affixed my official seal at _____, the day and year last above written.

Notary Public

My commission expires the _____ day of _____, 20____.



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SUPPLEMENT TO FORM 3

ACKNOWLEDGMENT OF SURETY

State of _____)
County of _____)ss

BOND NO. _____

COMPLETE APPLICABLE SECTION)

(Corporate Officer)

On this _____ day of _____, 20____, before me, a Notary Public in and for said County, personally appeared _____, personally known to me, who being by me duly sworn, did say that he/she, aforesaid officer of _____, a corporation duly organized and existing under the laws of the State of _____, that the seal affixed to the foregoing instrument is the corporate seal of said corporation, that the said instrument was signed, sealed and executed on behalf of said corporation by authority of its Board of Directors, and further acknowledges that the said instrument and the execution thereof to be the voluntary act and deed of said corporation.

(Attorney-In-Fact)

On this _____ day of _____, 20____, before me personally appeared _____, known to me or satisfactorily proven to be the person whose name is subscribed as attorney-in-fact for _____ and acknowledged that he/she executed the same as the act of his/her principal for the purpose therein contained.

IN WITNESS WHEREOF, I hereunto subscribed my name and affixed my official seal at _____, the day and year last above written.

Notary Public

My commission expires the _____ day of _____, 20____.