

CERTIFICATE OF CLERK

STATE OF KANSAS)
) ss.
COUNTY OF _____)

I, the undersigned, duly elected, qualified, and acting Clerk of (*select one*):

City/Village: _____, of the _____ class

County: _____

Other Type of Municipality: _____

in _____ County, Kansas (hereafter called the municipality) do hereby certify the municipality:

(1) Is duly organized in the State of Kansas per Kansas statute(s) _____, and the following are the duly elected, qualified and acting officers of said municipality:

<u>Name</u>	<u>Title</u>	<u>Term</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(2) Has continuously functioned as such municipality for a period of at least _____ years.

Witness whereof, I have hereunto set my hand officially and affixed the seal of said municipality this _____ day of _____, 20 ____.

SEAL

Clerk