

RECORDING REQUESTED BY:

AND WHEN RECORDED MAIL TO:

Order No.:
Escrow No.:
APN:

SPACE ABOVE THIS LINE FOR RECORDER'S USE

AFFIDAVIT - DEATH OF TRUSTEE

STATE OF CALIFORNIA)
) SS.
COUNTY OF _____)

_____ of legal age, being first duly sworn, deposes and says:

1. _____ is the decedent mentioned in the attached certified copy of Certificate of Death, and is the same person named as Trustee in that certain Declaration of Trust dated _____, executed by _____ as trustor(s).
2. At the time of decedent's death, decedent was the owner, as Trustee, of certain real property acquired by a deed recorded on _____, as Instrument No. _____, in Official Records of _____ County, California, describing the following real property:
3. I am the surviving or successor Trustee of the same trust under which said decedent held title as trustee pursuant to the deed described above, and am designated and empowered pursuant to the terms of said trust to serve as Trustee thereof.

Dated: _____

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.

Subscribed and sworn to (or affirmed) before me on this _____ day of _____, _____, by _____, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature _____

(This area for notary stamp)

ATTACH CERTIFIED COPY OF DEATH CERTIFICATE