CERTIFICATION OF TRUST

To be filled out by borrowers

I/W	Ve,, trustee(s) of the	Trust Dated	confirm	
the	e following facts:			
1.	The (Name of Trus		ited on	
2.	The settlor(s) of the trust are as follows:			
3.	The currently acting trustee(s) of the trust is/are:			
4.	The power of the trustee(s) includes:			
	a. The powers to sell, convey and exchange □	Yes ☐ No (check one)		
	b. The power to borrow money and encumber the		ortgage	
	☐ Yes ☐ No (check one)			
5.	The trust is ☐ revocable; ☐ irrevocable (check having the power to revoke the trust:	one) and the following party(ies) if any	, is/are identified as	
6.	The trust \square does, \square does not have multiple to	rustees (check one). If the trust has m	nultiple trustees, the	
	signatures of all the trustees or of any			
	of the trustees is required to exercise the powers	of the trust.		
7.	The trust identification number is as follows:			
	(Social Security Number	er/Employee Identification Number)		
8.	` ·	,		
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CERTIFICATION OF TRUST

(continued)

The undersigned trustee(s) hereby declare(s) that the trust has not been revoked, modified, or amended in any manner which would cause the representations contained herein to be incorrect. This certification is being signed by all of the currently acting trustees and is being executed in conformity with the provisions of California Probate Code Section 18100.5, Chapter 530, Statutes of 1993.

IN WITNESS WHEREOF, the undersigned have executed this document on the date(s) set forth below.

BY:		
Mary Wright		
Trustee		
BY:	_	
Trustee		
A notary public or other officer compl		
verifies only the identity of the individual		
document to which this certificate is at truthfulness, accuracy, or validity of that do		
adamantees, desardey, or valuely of that d	A SOUTH STATE OF THE STATE OF T	
State of	<u></u>	
County of		
Onb	here insert name and title of the officer)	Notary Public,
	(here insert name and title of the officer)	
personally appeared		
	ctory evidence to be the person(s) whose name(s) is/are	
	to me that he/she/they executed the same in his/her/the nature(s) on the instrument the person(s), or the entity u	
which the person(s) acted, executed the ins		pori beriali di
, , , ,		
	ınder the laws of the State of California that the foregoing	paragraph is
true and correct.		
WITNESS my hand and official seal.		
•		
Signature		
Signature		