

Grossmont Escrow Co.

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CERTIFICATION OF TRUSTEE

PURSUANT TO CALIFORNIA PROBATE CODE SECTION 18100.5

I(WE), _____, trustee(s)
confirm the following facts:

- 1. The (Name of Trust) _____ is currently in existence and was created on (Date of Creation of Trust) _____
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 trust property with a deed of trust or mortgage [] YES [] NO (Check one).
5. The trust is (a) Revocable []; (b) Irrevocable [] (check the applicable box) and the following party(ies) if any, is (are) identified as having the power of to revoke the trust _____
6. The trust (a) does []; (b) does not have multiple trustees [] (check the applicable box). If the trust has multiple trustees, the signatures of all the trustee 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 No. / Employee ID) _____
8. Title to trust assets shall be taken in the following fashion (Acting Trustees with Title and Full Name of Trust) _____

The undersigned trustee(s) hereby declares (declare) that the trust has not been revoked, modified, or amended in any manner which would cause the representations contained herein to be incorrect. The 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.

Date: _____

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.

STATE OF CALIFORNIA } S.S.
COUNTY OF _____

On _____, before me, _____, personally appeared _____ who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)