RECORDING REQUESTED BY:			
AND WHEN RECORDED MAIL TO:			
Order No: Escrow No:			
A.P.N.:	SPACE AB	OVE THIS LINE IS FOR R	ECORDER'S USE
AEEIDAVIT .	DEATH OF	TDIICTEE	
<u>AFFIDAVIT -</u> This Document P	rovided by Fidelity		
STATE OF CALIFORNIA			
COUNTY OF			
THE UNDERSIGNED,SAYS:	, BEING (OF LEGAL AGE, BEING DUL	Y SWORN, DEPOSES AND
1. That	1	the decedent mentioned i	n the attached certified
	_		
copy of Certificate of Death, is the same person as			
			as Trustor(s).
At the time of demise of the decedent, the decede			` '
known as			, which
property is described in a Deed which was signed by			as Grantor(s)
		and recorded as Instrur	ment No.
on	_ of Official Recor	ds of	County, State
of California.			
The legal description of said property is as follows:			
3. I.	am	the Successor Trustee und	der the above
3. I, referenced Trust, which was in effect at the time o which has not been revoked, and I hereby consen		decedent mentioned in par	ragraph 1 above, and
4. There is no federal estate tax due as the result of		ecedent mentioned in para	graph 1 above.
I declare under penalty of perjury, under the laws of th	e State of Californ	ia, that the foregoing is tru	e and correct.
State of California County of			
SUBSCRIBED AND SWORN TO (or affirmed) before me on day of,			
by			
proved to me on the basis of satisfactory evidence to be the who appeared before me.	person(s)		
			A notary public or other officer completing this certificate verifies only the identity of the individua who signed the document to which this certificate

Notary Signature _____ (seal)

is attached, and not the truthfulness, accuracy, or validity of that document.