Recording Requested By:	
When recorded mail document to:	
NAME	
ADDRESS	
CITY STATE & ZIP	
	Above Space for Recorder's Use Only
AFFIDAVIT OF DEATH OF TRUSTEE	
State of California County of	_}

## \_\_\_\_\_, of legal age, being first duly sworn, deposes and says: 1. \_\_\_\_\_\_, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person named as Trustee in the certain Declaration of Trust dated \_\_\_\_\_ executed by as trustor(s). 2. At the time of the decedent's death, decedent was the owner, as Trustee, of certain real property acquired by a deed recorded on \_\_\_\_\_\_, as instrument No.\_\_\_\_\_\_, in the Official Records of \_\_\_\_\_County, State of California, covering the following described property situated in the said County, State of California: 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. State of California County of \_\_\_\_\_\_} SUBSCRIBED AND SWORN TO (or affirmed) before me on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_ by\_\_\_\_\_ proved to me on the basis of satisfactory evidence to be the persons(s) who appeared before me. (Seal) Notary Signature