

RECORDING REQUESTED BY:

AND WHEN RECORDED MAIL TO:

SPACE ABOVE THIS LINE FOR RECORDER'S USE

**AFFIDAVIT CONFIRMING AUTHORITY UNDER POWER OF ATTORNEY**  
**California Probate Code Section 4305**

STATE OF CALIFORNIA )  
 ) SS.  
COUNTY OF \_\_\_\_\_ )

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

1. I am the attorney-in-fact for \_\_\_\_\_ (herein "Principal") pursuant to a Power of Attorney dated \_\_\_\_\_, \_\_\_\_\_ and recorded on \_\_\_\_\_, \_\_\_\_\_ as Instrument No. \_\_\_\_\_, Official Records of \_\_\_\_\_ County, California.
2. Principal is alive and does not suffer from any incapacity which would affect Principal's ability to enter into contracts or to personally execute the same documents I have been authorized to execute pursuant to said Power of Attorney.
3. Principal has not revoked said Power of Attorney.

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)