| AFFIDAVIT OF LOST PROMISSORY NO | |
|--|--|
| STATE OF CALIFORNIA) | |
|) ss, | |
| COUNTY OF) | |
| The undersigned, being first duly sworn, deposes and says: | |
| That they are the owner of that certain Note in the amount of \$ | dated |
| in favor of | |
| and executed by | |
| Deed of Trust dated, executed by | |
| | as Trustor |
| naming | |
| and | as Beneficiary |
| recorded, as Instrument No | in Book, |
| Page, in Official Records of the County Recorder of | County. |
| This Affidavit is made for the benefit and protection of | the said Trustee against any loss by nerein contained. |
| Dated | |
| A notary public or other officer completing this certificate verifies only the identity of o which this certificate is attached, and not the truthfulness, accuracy, or validity of t | |
| ate of California, County of | |
| JBSCRIBED AND SWORN TO BEFORE ME | |
| n this,, by | |
| ersonally proved to me on the basis of satisfactory evidence to be the erson (s) who appeared before me. | |