

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: \_\_\_\_\_

Subscribed and sworn to (or affirmed) before me,  
this \_\_\_\_\_ day of \_\_\_\_\_,  
by \_\_\_\_\_,  
proved to me on the basis of satisfactory evidence  
to be the person(s) who appeared before me.

Signature \_\_\_\_\_

Name \_\_\_\_\_  
(typed or printed)

(Area reserved for official notarial seal)