

AFFIDAVIT AND PERSONAL INDEMNITY

STATE OF CALIFORNIA
COUNTY OF _____

} SS.

I, (WE), THE UNDERSIGNED, HEREBY CERTIFY THAT THE PROMISSORY NOTE:

DATED: _____

FOR (AMOUNT): _____

EXECUTED BY: _____

IS THE ONE AND ONLY NOTE SECURED BY THE DEED OF TRUST:

DATED: _____

FOR (AMOUNT): _____

RECORDED: _____

THAT IN CONSIDERATION OF THE ISSUANCE BY THE TRUSTEE THEREIN NAMED OF ITS
RECONVEYANCE OF SAID DEED OF TRUST, BY REASON OF THE FOLLOWING VARIANCE:

AFFIANT(S) HEREBY AGREE(S) TO HOLD THE TRUSTEE THEREIN NAMED FREE AND CLEAR OF
ALL LIABILITY AND RESPONSIBILITY OF ANY LOSS, DAMAGE, AND EXPENSE THAT MAY ARISE
OR THAT THE TRUSTEE THEREIN NAMED MAY SUFFER BY REASON OF THE ISSUANCE OF
SUCH RECONVEYANCE SECURED BY SAID DEED OF TRUST.

DATED: _____
