

Trustee Certification

VAULT CUSTODY



☐ **BlueVault Orange County** Huntington Beach, CA, 7501 Edinger Avenue, Huntington Beach, CA 92647, (714) 485-0210

☐ **BlueVault San Diego** San Diego, CA, 5638 Mission Center Road, Suite 104, San Diego, CA 92108, (619) 342-8090

Title of Trust

Date of Formation

Name of Trustor(s)/Grantor(s)/Settlor(s)

Tax ID Number

Name of Trustee 1

Residential Address

Phone #

Soc. Sec. #

Date of Birth

Signature

Date of Signing

Name of Trustee 2

Residential Address

Phone #

Soc. Sec. #

Date of Birth

Signature

Date of Signing

By my/our signature(s) above, I/we certify, represent, and warrant that the information provided is true, accurate and complete, and that for good and valuable consideration receipt of which is acknowledged, Trustee(s) agree to the following:

1. All currently acting Trustees of the Trust have signed this document.
2. Each Trustee listed herein is authorized to act on behalf of the Trust without the approval or consent of any other Trustee(s).
3. Each Trustee listed herein has authority under the Trust and applicable law to give instructions and information to BlueVault, execute any relevant documents, and enter into any transaction with BlueVault subject to the terms and conditions set forth in the BlueVault Vault Custody Agreement.
4. The Trust has not been revoked, modified or amended in any manner that would cause these representations to be incorrect. The Trustee(s) will notify BlueVault if any information provided changes or if the Trust is revoked, modified or amended.
5. Trustee(s) will defend, indemnify and hold harmless, jointly and severally, BlueVault, its affiliates, its officers, employees, and agents from and against any claim, loss, expense, or other liability for acting on this information contained herein, acting upon incomplete or erroneous information provided by Trustee(s) or acting upon the instructions received from Trustee(s).

A notary public or other officer completing this certificate verifies only the identity of the individual(s) who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of the document.

STATE OF _____ } SS:

COUNTY OF _____ }

On _____ before me, _____, Notary,

personally appeared _____
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California and the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)