RECORDING REQUESTED BY		
AND WHEN RECORDED MAIL DOCUMENT AND TAX STATEMENT TO:		
NAME		
STREET ADDRESS		
CITY, STATE & ZIP CODE		
TITLE ORDER NO. ESCROW NO.	SF	ACE ABOVE THIS LINE FOR RECORDER'S USE ONLY
APN:		
ASSIGNMENT OF DEED OF TRUST		
FOR VALUE RECEIVED, the undersign	ned	hereby grants.
assigns, and transfers to		all beneficial interest under that certain
Deed of Trust dated	executed by	, Trustor, to
	, Trustee, and re	corded as instrument no of
FOR VALUE RECEIVED, the undersigned		
Together with the note or notes therein d interest, and all rights accrued or to accru Dated		to, the money due and to become due thereon with of Trust.
	-	(Signature of Beneficiary)
	-	(Typed or Printed Name of Beneficiary)
A notary public or other officer completing this certification	te verifies only the identit	y of the individual who signed the document to which this certificate is
attached, and not the truthfulness, accuracy, or validity		
STATE OF)SS		
COUNTY OF)		
On, b	efore me,	, personally appeared
(Date)		
(Name of person signir	g)	, 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 that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

* There are various types of forms depending on each person's legal status. Before you use this form you may want to consult an attorney if you have questions concerning which document form is appropriate for your transaction.