RECORDING REQUESTED BY:

WHEN KECURDI	ED MAIL TO:			
NAME:				
ADDRESS:				
CITY: STATE/ZIP:				
Title Order No.:	Space A	above This Line For	Recorder's Use Escrow	No.:
CAl	REQUEST LIFORNIA C		TICE UNDER DE SECTION	
any Notice of D	eith California Civil Coefault and a copy of	any Notice of S	Sale under the Deed of Instrument No	of Trust recorded on
	, Page	,	of Official Records of	
	or's Parcel No			i property merem as
Executed by				
as	Trustor,		in	which
is	named	as	Beneficiary,, as Trust	and ee, be mailed to:
		(Name)		_
		, ,		
		(Address)		_
		(Address)		-
	copy of any Notice of recorded request. If y	of Default and		
contained in this		of Default and a	nges, a new request m	ust be recorded.

State of California County of)		
he/she/they execu	uted the same in his/her/their autho	e(s) is/are subscribed to the within instrurized capacity(ies), and that by his/her/erson(s) acted, executed the instrument	their signature(s) on the instrument
I certify under PEN	NALTY OF PERJURY under the law	s of the State of California that the foreg	oing paragraph is true and correct.
WITNESS my han	nd and official seal,		
Signature	(Seal)		