



KWIK MORTGAGE CORPORATION

SOUTH DAKOTA TRUST CERTIFICATION

CERTIFICATE OF TRUST

The undersigned hereby declare(s) the following to be true and correct:

1. A trust instrument or Will executed on _____ established a trust which is still in existence on the date this Certificate is signed. The current name of the trust, if it has been named, is _____. (Insert n/a if the Trust does not have a name). The name of the trust was/was not changed. If the name of the trust was changed, it was previously known as _____.

2. The name of the settlor, grantor, trustor, testator or testatrix, as the case may be, is _____.

3. The name of each original trustee and the name and address of each trustee and each trust protector currently empowered to act under the trust instrument or Will on the date of the execution of this Certificate of Trust is as follows:

_____.

4. The person who signs this certificate below certifies that the trust instrument or Will contains the following powers which are given to the trustee, which may or may not be inclusive of all of the powers given to the trustee:

(a) The power to sell, convey, or transfer title to any interest in property held in the trust
[] Yes [] No (check one);

(b) The power to pledge, mortgage, or lease any interest in property held in the trust
[] Yes [] No (check one); and

(c) further contains the following provisions (optional): _____.

The number of trustees required to join in an action by the provisions of the trust instrument or Will is _____.

5. The trust is revocable/irrevocable. _____.

If revocable, the trust has not been revoked.

6. The current beneficiary(ies) of the Trust is/are [] the Settlor(s) or [] others (check one).



7. The trust is [] is not [] (check one) supervised by a court. If supervised, the trust is supervised by _____ (Court) and the following restrictions have been imposed by the court on the trustee's ability to act as otherwise permitted by statute or the terms of the trust instrument or will:

_____.

8. The trust has not been modified or amended in any manner that would cause the representations contained in this Certificate of Trust to be incorrect. The statements contained in this Certificate of Trust are true and correct.

(ALL SIGNATURES MUST BE ACKNOWLEDGED)

Dated: _____

Trustee: _____
(Signature)

(Type or print name)

Dated: _____

Trustee: _____
(Signature)

(Type or print name)

Dated: _____

Trustee: _____
(Signature)

(Type or print name)



STATE OF SOUTH DAKOTA
COUNTY OF _____

On this, the ___ day of _____, ____, before me, the undersigned officer, personally appeared _____, known to me (or proved to me on the oath of _____) to be the person whose is described in, and who executed the within instrument and acknowledged to me that he (or they) executed same.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

Notary Public, South Dakota
My Commission expires: _____