
STATE OF MINNESOTA

COUNTY OF _____

**CERTIFICATE OF TRUST
by individual
MINN. STAT. § 501C.1013**

_____, being
first duly sworn on oath states, or affirms under penalties of perjury, that:

1. The name of the trust, if one is given, is: _____.
2. The date of the trust instrument is: _____.
3. The name and address of each trustee empowered to act under the trust instrument at the time of execution of this Certificate of Trust is:
4. The trustees are authorized by the trust instrument to sell, convey, pledge, lease or transfer title to any interest in real or personal property, except as limited by the following: (if none, so indicate)
5. The number of trustees required to act is: _____
6. The trust has has not been terminated. (check one box)
The trust instrument has has not been revoked. (check one box)

Pursuant to Minnesota Statutes section 501C.1013, subdivision 2:

The name of each settlor of the trust is: _____

The name of each original trustee is: _____

Check this box if an Affidavit of Trustee, consisting of _____ pages, is attached to this Certificate of Trust.

The statements contained in this Certificate of Trust are true and correct and there are no other provisions in the trust instrument, or amendments to it, that limit (i) the powers of the trustee(s) to sell, convey, pledge, mortgage, lease, or transfer title to interest in real or personal property, or (ii) the authority of the trustees to exercise any other power identified in this Certificate of Trust.

Trustee or Settlor

(signature)

(signature)

Signed and sworn to (or affirmed) before me on _____, by _____
(month/day/year)

(insert name of Trustee or Settlor making statement)

(Stamp)

(signature of notarial officer)

Title (and Rank): _____

My commission expires: _____
(month/day/year)

THIS INSTRUMENT WAS DRAFTED BY:

(insert name and address)