CERTIFICATE OF INDEPENDENT REVIEW

l,	have
[Attorney's Name]	
reviewed	
[Name o	Document]
and have counseled my client,	
[Name of Client]	
fully and privately on the natu	e and legal effect of the
designation of	contained in that
[Name o	Trustee]
position to advise my client im designation. On the basis of th otherwise be subject to remov	ted from the person named as trustee as to be in a partially and confidentially as to the consequences of the s counsel, I conclude that the designation who would all under paragraph (6) of subdivision (b) of section 15642 settlor's intent and that intent is not the product of frauc
(Name of Attorney)	(Date)
[Exhibit to "Take Care When G attorney to assist you]	ving to Your Caregiver" – should not be used without an