

AFFIDAVIT OF OWNER OCCUPANT

I, [REDACTED], am the purchaser of 361 DEL MAR POINT and I am authorized to execute this Affidavit as follows:

- 1) I understand that SOUTHSIDE NEIGHBORHOOD STABILIZATION 2021-4 is a limited partnership in which the managing general partner is a nonprofit corporation that promotes homeowner retention and homeownership.
- 2) I understand that 361 DEL MAR POINT is being marketed on the MLS giving priority to owner occupants as our attempt to increase homeownership.
- 3) I certify as the purchaser of 361 DEL MAR POINT I plan on occupying the home as an owner occupant. I certify (or declare) under penalty of perjury that the foregoing is true and correct:

12/6/21 SAN FRANCISCO, CA

(Date and Place)

[Handwritten Signature]

(Signature)

By: [REDACTED]

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of SAN FRANCISCO

Subscribed and sworn to (or affirmed) before me on this 6th day of DECEMBER, 2021, by _____, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature page and certificate bear embossment.

Seal _____

Signature _____



CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

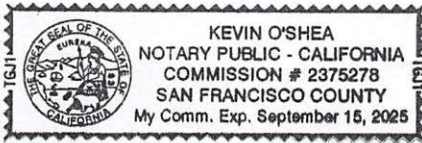
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of San Francisco)
On 12/6/2021 before me, Kevin O'Shea, Notary Public
Date Here Insert Name and Title of the Officer
personally appeared Michael Sha & Carol Pai
Name(s) of Signer(s)

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 [Signature]
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Affidavit Document Date: 12/6/2021
Number of Pages: 1 Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____ Signer's Name: _____
 Corporate Officer — Title(s): _____ Corporate Officer — Title(s): _____
 Partner Limited General Partner — Limited General
 Individual Attorney-in-Fact Individual Attorney in Fact
 Trustee Guardian or Conservator Trustee Guardian or Conservator
 Other: _____ Other: _____
Signer Is Representing: _____ Signer Is Representing: _____