SAN BERNARDING COUNTY FIRE PROTECTION DISTRICT COMMUNITY FACILITIES DISTRICT NO. 94-01 (HESPERIA)

WAIVER AND CONSENT RESPECTING CONDUCT OF MAILED BALLOT, LANDOWNER ELECTION

The undersigned is a person legally entitled and authorized to cast the ballots for the Owner in the mailed-ballot election to be conducted on June 23, 2020, or a later date established by the Board, to determine whether the Subject Property shall be annexed to CFD No. 94-01 and thereby made subject to special tax of CFD No. 94-01 pursuant to the Mello-Roos Community Facilities Act of 1982 (Sections 53311 and following: California Government Code) (the "Act")

The undersigned, on behalf of the Owner, hereby waives (and, with respect to Item 4 agrees to) each of the following:

- any and all minimum time periods relative to the landowner election to be held pursuant to Government Code Section 53339.7 of the Act:
- 2. The preparation and distribution of an impartial analysis of the ballot measure, as well as arguments in favor and against, under the authority of Government Code Section 53327(b) of the Act:
- 3 the requirements regarding the time to mail ballots to the qualified electors under Elections Code Section 4101, and agrees to accept either mailed service or personal service of the ballot;
- 4 the requirements regarding identification envelopes for the return of mailed ballots contained in Government Code Section 53327.5 of the Act; and
- 5. any and all defect in notice or procedure in the proceedings for the annexation of the Subject Property to CFD No. 94-01, including but not limited to the conduct of the election, whether known or unknown (other than the right to have ballots accurately counted).

SAN BERNARDING COUNTY FIRE PROTECTION DISTRICT, COMMUNTLY FACILITIES DISTRICT NO. 94-01 (HESPERIA)

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The undersigned expressly acknowledges, represents and states that the election is being expedited by the San Bernardino County Fire Protection District, pursuant to this Waiver and Consent, at the particular instance and request of Owner.

foregoing is true and correct and that this declaration is executed on 6.72 20 20

Entity

Signature

Print Name and Title

In event this Waiver and Consent is executed in reliance upon an "Appointment of Representative to Execute Waiver and Consent and to Cast Ballot" a photocopy of the dated and signed appointment form must be attached hereto prior to submission of this Waiver and Consent and the related Special Election Ballot to the Secretary of the Board.

Standard California Notary Acknowledgment Form Attached

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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 Riverside	}
On June 22nd , 2020 before me,	Leure Martinez noter y DUG(TC,
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. Votation of the seal of the se	REYNA MARTINEZ Commission No. 2225012 NOTARY PUBLIC-CALIFORNIA RIVERSIDE COUNTY My Carlim. Expires DECEMBER 11, 2021
DESCRIPTION OF THE ATTACHED DOCUMENT Bunardins County fire potentiated accuments (Title or description of attached document continued) Number of Pages Document Date	if needed, should be completed and attached to the document. Acknowledgments
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Partner(s) Attorney-in-Fact Trustee(s) Other	 Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity is a

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

• Securely attach this document to the signed document with a staple.

2015 Version www.NotaryClasses.com 800-873-9865