

RECORDING REQUESTED BY:

WHEN RECORDED MAIL TO:

Name: _____

Address: _____

City: _____

State, Zip: _____

Above Space for Recorder's Use Only

AFFIDAVIT OF DEATH OF JOINT TENANT

Assessor's Parcel Number: _____

State of California

County of _____ } ss

_____, of legal age, being first duly sworn, deposes and says: That
_____, the decedent mentioned in the attached certificate copy of Certificate
of Death, is the same person as _____ named as one of the parties in
that certain _____ dated _____,
executed by _____
to _____

as joint tenants, recorded as Instrument No. _____ on _____,
in Book _____, Page _____, of _____ Records of _____
County, California, covering the following described property situated in the said County, State of California:

That the value of all real and personal property owned by the said decedent at date of death, including the full value of the
property above described, did not then exceed the sum of \$ _____

Print Name

Signature

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 to the truthfulness, accuracy, or validity of that document.

State of California

County of _____

Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20____, by _____,
proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

(Official SEAL)

Notary Signature