RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO

NAME ADDRESS CITY &

STATE

-------------------------------------------------------------------------------------- SPACE ABOVE THIS LINE FOR RECORDERS USE -----------------

**AFFIDAVIT – DEATH OF JOINT TENANT**

**STATE OF CALIFORNIA,** APN:

County of

Certificate of Death, is same person as

, of legal age, being first duly sworn, deposes and says:

, the decedent mentioned in the attached certified copy of

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 Official Records of

County, California, covering the following described property situated in the

County of , State of California:

(Commonly known as: )

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

Dated

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

SUBSCRIBED AND SWORN TO (or affirmed) before me

FOR NOTARY SEAL OR STAMP

this by

Day of

, 20 .

proved to me on the basis of satisfactory evidence to be the person(s)

who appeared before me. Signature:

Notary public in and for said State

Title Order No. Escrow No.