

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO:

NAME

STREET ADDRESS

CITY, STATE & ZIP CODE

SPACE ABOVE THIS LINE FOR RECORDER'S USE

AFFIDAVIT – DEATH OF JOINT TENANT

STATE OF _____

COUNTY OF _____

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

That _____, the decedent mentioned in the attached certified 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 _____, _____, _____ of the Official Records in the Office of the County Recorder of _____ County, State of _____, concerning the following described real property situated in the City of _____, County of _____, State of _____:

(Insert Legal Description)

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

Dated _____, _____.

Signature of Joint Tenant

(Type or print full name of Joint Tenant)

Signature of Joint Tenant

(Type or print full name of Joint Tenant)

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

SIGNATURE _____ (seal)

MAIL TAX STATEMENT TO: _____