**RECORDING REQUESTED BY:**

**WHEN RECORDED MAIL TO:**

NAME: ADDRESS:

CITY: STATE/ZIP:

Title Order No.:

Space Above This Line For Recorder's Use Escrow No.:

**AFFIDAVIT - DEATH OF JOINT TENANT**

STATE OF CALIFORNIA}

COUNTY OF } *S.S.*

 , 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 on , as Instrument No. , in Book , Page , of Official Records of County, California, covering the following described property situated in the County of

 , State of California:

Assessor's Parcel No.: .

Property Address: .

The value of all real and personal property owned by said decedent at date of death, including the property described above, did not then exceed the sum of $600,000.00.

Executed on this

 .

day of ,

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)