

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL THIS DOCUMENT AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENT TO:

NAME  
STREET ADDRESS  
CITY, STATE, ZIP

SPACE ABOVE THIS LINE FOR RECORDER'S USE

## AFFIDAVIT OF DEATH OF JOINT TENANT

\_\_\_\_\_ 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 \_\_\_\_\_ 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 \_\_\_\_\_, California, covering the following described property situated in the said County, State of California.

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)