

RECORDING REQUESTED BY

WHEN RECORDED MAIL TO

Name  
Address  
City, State Zip

Title Order No.  
Escrow No.

**AFFIDAVIT - DEATH OF JOINT TENANT**

STATE OF CALIFORNIA  
County of \_\_\_\_\_ }ss.

\_\_\_\_\_, 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 \_\_\_\_\_, and recorded on \_\_\_\_\_, in Book/Reel \_\_\_\_\_, at Page/Image \_\_\_\_\_, Series/Instrument Number \_\_\_\_\_ of Official Records of \_\_\_\_\_ County, California, covering the following described real property in \_\_\_\_\_, in said County, State of California:

A.P.N.

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.

Subscribed and sworn to (or affirmed) before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_,

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature \_\_\_\_\_

(This area for notary stamp)