RECORDING REQUESTED BY:	
AND WHEN RECORDED MAIL TO:	
A.P.N.: Order No.: Escrow No.:	

SPACE ABOVE THIS LINE IS FOR RECORDER'S USE

AFFIDAVIT – DEATH OI	F JOINT TENANT
STATE OF CALIFORNIA	
COUNTY OF	
	_, of legal age, being first duly sworn, deposes and says.
that	_, the decedent mentioned in the attached and 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
in Book, Page, of Official Records of Los	s Angeles, State of California, covering the following
described property situated in the said County, State of California.	
<legal></legal>	
That the value of all real and personal property owned by said deceden	at at date of death, including the full value of the property
above described, did not then exceed the sum of \$	
Dated: < - pause>	
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.	< - pause>
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	
Notary Public in and for said County and State	(Seal) (This Area for Official Notary Seal)