

RECORDING REQUESTED BY:

AND WHEN RECORDED MAIL TO:

< - Enter Name>
< - Enter Street Address
< - Enter City, State, Zip>

A.P.N.: 0
Order No.:
Escrow No.:

SPACE ABOVE THIS LINE IS FOR RECORDER'S USE

**AFFIDAVIT – DEATH OF JOINT TENANT
By Surviving Spouse**

STATE OF CALIFORNIA)
COUNTY OF _____)

< - Enter Name of Person Signing This Affidavit>, of legal age, being first duly sworn, deposes and says:

1. < - Enter Name of Decedent> is the decedent mentioned in the attached certified copy of Certificate of Death, who died on < - Enter Date>, at < - Enter Place of Death>.
2. Declarant is the surviving spouse of Decedent and was married to Decedent on the date of death.
3. Declarant and Decedent are the same persons who are named as grantees in that certain deed dated < - Enter Date of Deed>, executed by < - Enter Name of Parties Who Executed Document>, in favor of the grantees as **joint tenants**, recorded on < - Enter Date>, as Instrument No. < - Enter #>, of Official Records of **Los Angeles** County, California describing the following real property:

<LEGAL>

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.

< pause>

(Seal)

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

(This area for official notary seal)