

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO

NAME

ADDRESS

CITY
STATE & ZIP

TITLE ORDER NO

ESCROW NO.

APN NO.

**AFFIDAVIT OF DEATH OF SPOUSE
(COMMUNITY PROPERTY WITH RIGHT OF SURVIVORSHIP)**

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 _____, as Community Property with Right of Survivorship, recorded as Instrument No. _____ on _____, in Book _____, Page _____, of Official Records of _____ County, California, covering the following described property situated in the said County, State of California

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