

RECORDING REQUESTED BY
JEAN MARY WILLIAMS

File No. 43359

BOOK 13 PAGE 562

AND WHEN RECORDED MAIL TO

Name Jean Mary Williams
Street Address 915 Concha Street
City & State Altadena, California

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Affidavit—Death of Joint Tenant

TO 424 C

THIS FORM FURNISHED BY TITLE INSURANCE AND TRUST COMPANY

STATE OF CALIFORNIA,

COUNTY OF Los Angeles

ss.

Jean Mary Williams, of legal age, being first duly sworn, deposes and says:
That Thomas A. Williams, the decedent mentioned in the attached certified copy of
Certificate of Death, is the same person as Thomas A. Williams
named as one of the parties in that certain Deed dated _____,
executed by Allen S. Hopkins
to Thomas A. Williams and Jean Mary Williams, husband and wife, as joint tenants,
as joint tenants, recorded as Instrument No. _____, on _____, in
book Nevada, page _____, of Official Records of Eureka
County, California, covering the following described property situated in the
County of Eureka, State of California: Nevada:

The SE 1/4 of the SW 1/4 of Section 6, T30N-R49E,
M. D. B. -M. as per government survey.

That the value of all real and personal property owned by said decedent at date of death, including the full value of
the property above described, did not then exceed the sum of \$ 3,000.00

Dated Dec. 5, 1966

Jean Mary Williams

SUBSCRIBED AND SWORN TO before me

this 5th day of December 1966

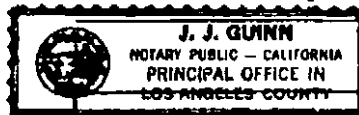
(Seal)

Signature

J. J. GUINN
Name (Typed or Printed)

Notary Public in and for said State

My Commission Expires
Oct. 4, 1968



Title Order No. _____

Escrow or Loan No. _____

This is a true certified copy of the record if it bears the seal of the County Recorder imprinted in purple ink.
 FILE NOV 14 1966
 \$2.00
 Ray C. Bell COUNTY RECORDER
 LOS ANGELES COUNTY, CALIFORNIA

FILED FEB 25 1966
 HAT E. 125. COUNTY RECORDER

STATE OF CALIFORNIA - DEPARTMENT OF PUBLIC HEALTH				LOCAL REGISTRATION DISTRICT AND	
CERTIFICATE OF DEATH				7069 - YKK	
NAME OF DECEASED - FIRST NAME, MIDDLE NAME, LAST NAME		THOMAS ALONZO WILLIAMS		DATE OF DEATH - MONTH, DAY, YEAR	
SEX		Male		DATE OF BIRTH - MONTH, DAY, YEAR	
RACE		White		AGE - YEARS, MONTHS, DAYS	
PLACE AND COUNTRY OF BIRTH		Montana		CITY OF DEATH	
NAME AND ADDRESS OF FATHER		Thomas Alonzo Williams, 715 Canby Street, Los Angeles, California		NAME AND ADDRESS OF MOTHER	
NAME AND ADDRESS OF LAST RESIDENCE		715 Canby Street, Los Angeles, California		NAME AND ADDRESS OF LAST RESIDENCE	
LAST OCCUPATION		Clergyman		NAME AND ADDRESS OF LAST EMPLOYER	
MARRIAGE		Married		NAME AND ADDRESS OF SPOUSE	
PLACE OF DEATH		Pasadena		CITY OF DEATH	
LAST USUAL RESIDENCE		715 Canby Street, Los Angeles, California		NAME AND ADDRESS OF LAST EMPLOYER	
INTERVIEWED BY		J. H. Smith		DATE OF INTERVIEW	
CAUSE OF DEATH		Heart Disease		DATE OF DEATH	
SIGNATURE OF DECEASED		Thomas Alonzo Williams		DATE OF SIGNATURE	
SIGNATURE OF WITNESS		J. H. Smith		DATE OF SIGNATURE	
SIGNATURE OF PHYSICIAN		J. H. Smith		DATE OF SIGNATURE	
SIGNATURE OF COUNTY RECORDER		Ray C. Bell		DATE OF SIGNATURE	



RECORDED & INDEXED
 14359
 OFFICIAL RECORDS
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 \$3.05