	DE-305		
ATTORNEY OR PARTY WITHOUT	ATTORNEY (name, address, and State Bar number):	]	
After recording return to:			
TEL NO.:	FAX NO. (optional):		
E-MAIL ADDRESS (optional):			
ATTORNEY FOR (name):		-	
SUPERIOR COURT OF CALIFORN	IA, COUNTY OF		
STREET ADDRESS:			
MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			FOR RECORDER'S USE ON
MATTER OF (name):			CASE NUMBER:
		DECEDENT	

	DECEDENT	
	AFFIDAVIT RE REAL PROPERTY OF SMALL VALUE (\$50,000 or Less)	FOR COURT USE ONLY
1.	Decedent <i>(name):</i> died on <i>(date):</i>	
2.	Decedent died at (city, state):	
3.	At least <b>six months</b> have elapsed since the date of death of decedent as shown in the certified copy of decedent's death certificate attached to this affidavit. (Attach a certified copy of decedent's death certificate.)	
4.	<ul> <li>a. Decedent was domiciled in this county at the time of death.</li> <li>b. Decedent was <b>not</b> domiciled in California at the time of death.</li> </ul>	

Decedent died owning real property in this county.

- 5. a. The legal description and the Assessor's Parcel Number (APN) of decedent's real property claimed by the declarant(s) are provided on an attached page labeled Attachment 5a, "Legal Description." (Copy legal description exactly from deed or other legal instrument.)
  - b. Decedent's interest in this real property is as follows (specify):
- 6. Each declarant is a successor of decedent (as defined in Probate Code section 13006) and a successor to decedent's interest in the real property described in item 5a, or signs this declaration on behalf of an entity that is a successor of decedent and to decedent's interest in the real property, and no other person or entity has a superior right, because each declarant or entity is:
  - (will) a beneficiary that succeeded to the property under decedent's will. (Attach a copy of the will.) a.
  - b. (*no will*) a person who succeeded to the property under Probate Code sections 6401 and 6402.

7.	Names and addresses of each guardian or conservator of dece	edent's estate at date of death: no	one	are as follows:*
	Names	Addresses		

(\*You must mail [or serve, per Prob. Code, § 1216] a copy of this affidavit and all attachments to each guardian or conservator listed above. You may use Judicial Council form POS-030 for a proof of mailing or form POS-020 for a proof of personal service.)

8. The gross value of decedent's interest in all real property located in California as shown by the attached Inventory and Appraisalexcluding the real property described in Probate Code section 13050 (property held in joint tenancy or as a life estate or other interest terminable upon decedent's death, property passing to decedent's spouse, property in a trust revocable by the decedent, etc.)-did not exceed \$50,000 as of the date of decedent's death. Page 1 of 2

Probate Code, § 13200 www.courts.ca.gov

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MATTER OF (Name):	CASE NUMBER:
DECEDENT	

- 9. An Inventory and Appraisal of all of decedent's interests in real property in California is attached. The appraisal was made by a probate referee appointed for the county in which the property is located. (You must prepare the Inventory on Judicial Council forms DE-160 and DE-161. You may select any probate referee appointed for the county for the appraisal. The California State Controller's Office has a list of all probate referees, shown by county on its website, and each court has a list of probate referees appointed for its county. Check with the probate referee you select or consult an attorney for help in preparing the Inventory.)
- 10. No proceeding is now being or has been conducted in California for administration of decedent's estate.
- 11. Funeral expenses, expenses of last illness, and all known unsecured debts of the decedent have been paid. (NOTE: You may be personally liable for decedent's unsecured debts up to the fair market value of the real property and any income you receive from it.)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

(TYPE OR F	PRINT NAME)*	(SIGNATURE OF DECLARANT)
Date:		
(TYPE OR F	PRINT NAME)*	(SIGNATURE OF DECLARANT)
Date:		
(TYPE OR PRINT NAME)*		(SIGNATURE OF DECLARANT) SIGNATURE OF ADDITIONAL DECLARANTS ATTACHED
* A declarant claiming on behalf of will, and declarant's capacity to sign	-	o state the name of the entity that is a beneficiary under the decedent's stee, Chief Executive Officer, etc.).
NOTARY ACKNOWLEDGMENT		dgment may be affixed as a rider (small strip) to this page. If addi- nts are required, they must be attached as 8-1/2-by-11-inch pages.)

STATE OF CALIFORNIA, COUNTY OF (specify):

On (date):

Date:

, before me (name and title):

personally appeared (name(s)):

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the instrument in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF State of California that the for			
WITNESS my hand and offic	al seal.		
(SIGNATUF	RE OF NOTARY PUBLIC)		
(SEAL)			
		CLERK'S CERTIFICATE	
	I certify that the foregoing, including any attached notary acknowledgments and any attached legal description of the property (but excluding other attachments), is a true and correct copy of the original affidavit on file in my office. ( <i>Certified copies of this affidavit do not include the</i> (1) death certificate, (2) will, or (3) inventory and appraisal. See Probate Code section 13202.)		
	Date:	Clerk, by	, Deputy
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## (\$50,000 or Less) (Probate—Decedents' Estates)