



AFFIDAVIT FOR TRANSFER OF PERSONAL PROPERTY

San Joaquin County Employees' Retirement Association

Received box - SJCERA Staff use only

IMPORTANT: Fully complete and return this form to SJCERA at **contactus@sjcera.org** or **220 E. Channel Street, Stockton, CA 95202**. If an incomplete form is returned, a delay in services may occur.

SECTION 1: STATEMENT

1. The decedent's name is _____.
2. The decedent died on _____, 20_____, in the County of _____, State of California.
3. At least 40 days have elapsed since the death of the decedent, as shown in a certified copy of the decedent's death certificate attached to this affidavit.
4. Either of the following, marked as appropriate:
☐ No proceeding is now being or has been conducted in California for administration of the decedent's estate; OR
☐ The decedent's personal representative has consented in writing to the payment, transfer, or delivery to the affiant of the property described herein.
5. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in Section 13050 of the California Probate Code, does not exceed \$184,500.00.
6. The property of the decedent that is to be paid, transferred, or delivered to the undersigned in San Joaquin County Employees' Retirement Association death benefits.
7. The name of the successor of the decedent (as defined in Section 13006 of the California Probate Code) to the described property is _____.
8. Either of the following, marked as appropriate:
☐ The affiant is the successor of the decedent (as defined in section 13006 of the California Probate Code) to the decedent's interest in the described property; OR
☐ The affiant is authorized under Section 13051 of the California Probate Code to act on behalf of the successor of the decedent (identified above) with respect to the decedent's interest in the described property.
9. No other person has a superior right to the interest of the decedent in the described property.
10. The affiant requests that the described property be paid, delivered, or transferred to the affiant or declarant.
11. The affiant affirms and declares under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SECTION 2: CONTACT INFORMATION

Signature of Affiant: _____ Date: _____

Print Affiant Name: _____

Affiant SSN: _____ DOB: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

[If more than one Affiant]

Signature of Affiant: _____ Date: _____

Print Affiant Name: _____

Affiant SSN: _____ DOB: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

[Notary Acknowledgment attached as Page 3 of 3]

SECTION 3: NOTARY ACKNOWLEDGMENT

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 the document.

State of California County of _____.

On _____ before me, _____,

personally appeared _____, who proved to me on
Date Name of Notary

the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the
Name of Affiant
within instrument and acknowledged to me that he/she/they executed the same 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 PERJURY under the laws of the State of California that the
foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature: _____