RECORDING REQUESTED BY:
Jessie G. Camacho

35163

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AND WHEN RECORDED MAIL TO:
Jessie G. Camacho
14538 Lyle St.
Sylmar, CA 91342

'97 MAR 31 P2:19

MAIL TAX STATEMENTS TO
Jessie G. Camacho
14538 Lyle St.
Sylmar, CA 91342

AFFIDAVIT - DEATH JOINT TENANT

APN # R81634

State of California } ss.
County of Los Angeles }

JESSIE G. CAMACHO of legal age, duly sworn, deposes and says:

That Mariano Camacho, the decedent mentioned in the attached certified copy of Certificate of Death is the same person as Mariano Camacho, named as one the parties in that certain Bargain and Sale Deed dated June 25, 1979, executed by Wells Fargo Realty Services, Inc., as Trustee, (Trust No.0108) a California Corporation, to Mariano Camacho and Jessie G. Camacho, husband and wife, as joint tenants, recorded as Instrument No. 69958, on July 2, 1979, of Official Records of Klamath County, Oregon, covering the following described property:

LOT 20 OF BLOCK 24, OREGON PINES, AS SAME IS SHOWN ON PLAT FILED JUNE 30, 1969 DULY RECORDED IN THE OFFICE OF THE COUNTY RECORDER OF SAID COUNTY.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Dated this 19 day of Feb, 1997, in the City of Sylmar, County of Los Angeles, State of California.

Jessie G. Camacho
Jessie G. Camacho

Subscribed and sworn before me on Feb. 19, 1997.

5-21-99
Notary Expiration Date

Notary Public

GREG PECORA
Comm. #1067615
NOTARY PUBLIC - CALIFORNIA
ORANGE COUNTY
Comm. Exp. May 21, 1999

DJ
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CERTIFICATE OF DEATH

STATE OF CALIFORNIA

USE BLACK INK ONLY

STATE FILE NUMBER 9282

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

DECEDENT PERSONAL DATA

1A. NAME OF DECEDENT—FIRST (GIVEN)	1B. MIDDLE	1C. LAST (FAMILY)	2A. DATE OF DEATH—MO., DAY, YR.	2B. HOUR	3. SEX
Mariano	---	Camacho	January 10, 1991	1900	M

4. RACE	5. HISPANIC—SPECIFY	6. DATE OF BIRTH—MO., DAY, YR.	7. AGE IN YEARS	IF UNDER 1 YEAR: MONTHS	DAYS	IF UNDER 24 HOURS: HOURS	MINUTES
White	[X] Yes Mex.-Amer. [ ] No	Jan. 14, 1921	69				

8. STATE OF BIRTH	9. CITIZEN OF WHAT COUNTRY	10A. FULL NAME OF FATHER	10B. STATE OF BIRTH	11A. FULL MAIDEN NAME OF MOTHER	11B. STATE OF BIRTH
CA	USA	Mariano Camacho	Mexico	Esther Ybarra	Texas

12. MILITARY SERVICE?	13. SOCIAL SECURITY NO.	14. MARITAL STATUS	15. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER MAIDEN NAME)
19 43 TO 19 46 [ ] NONE	[redacted]	Married	Jessie Govea

16A. USUAL OCCUPATION	16B. USUAL KIND OF BUSINESS OR INDUSTRY	16C. USUAL EMPLOYER	16D. YEARS IN OCCUPATION	17. EDUCATION—YEARS COMPLETED
Retired Laborer	Brewery	Anheuser Busch	25	12

USUAL RESIDENCE

18A. RESIDENCE—STREET AND NUMBER OR LOCATION	18B. CITY	18C. ZIP CODE
14538 Lyle Street	Sylmar	91342

18D. COUNTY	18E. NUMBER OF YEARS IN THIS COUNTY	18F. STATE OR FOREIGN COUNTRY	20. NAME, RELATIONSHIP, MAILING ADDRESS AND ZIP CODE OF INFORMANT
Los Angeles	76	California	Jessie Camacho - Wife 14538 Lyle Street Sylmar, CA. 91342

PLACE OF DEATH

19A. PLACE OF DEATH	19B. IF HOSPITAL, SPECIFY ONE: IP, ER/OP, DOA	19C. COUNTY
Holy Cross Hospital	IP	Los Angeles

19D. STREET ADDRESS—STREET AND NUMBER OR LOCATION	19E. CITY
15031 Rinaldi Street	Mission Hills

CAUSE OF DEATH

21. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)

		TIME INTERVAL BETWEEN ONSET AND DEATH
IMMEDIATE CAUSE (A)	Cardio - Pulmonary Arrest	5 min
DUE TO (B)	Hepato - Renal Syndrome	10 days
DUE TO (C)	Cirrhosis of Liver	10 years

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22. WAS DEATH REPORTED TO CORONER? REFERRAL NUMBER [ ] YES [X] NO

23. WAS SURGERY PERFORMED? [ ] YES [X] NO

24A. WAS AUTOPSY PERFORMED? [ ] YES [X] NO

24B. WAS IT USED IN DETERMINING CAUSE OF DEATH? [ ] YES [X] NO

25. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 21: Aortic Regurgitation

26. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 21 OR 25? IF YES, LIST TYPE OF OPERATION AND DATE. No

PHYSICIAN'S CERTIFICATION

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.

27B. SIGNATURE AND DEGREE OR TITLE OF CERTIFIER: R. F. Robertson M.D.

27C. CERTIFIER'S LICENSE NUMBER: A 25716

27D. DATE SIGNED: 1/11/91

27A. DECEDENT ATTENDED SINCE MONTH, DAY, YEAR	DECEDENT LAST SEEN ALIVE MONTH, DAY, YEAR
8/1/83	1/10/91

27E. TYPE ATTENDING PHYSICIAN'S NAME AND ADDRESS: Robert Robertson, M.D. 17075 Devonshire Northridge, CA.

CORONER'S USE ONLY

I

I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.

28A. SIGNATURE AND TITLE OF CORONER OR DEPUTY CORONER

28B. DATE SIGNED

29. MANNER OF DEATH—specify one: natural, accident, suicide, homicide, pending investigation or could not be determined

30A. PLACE OF INJURY

30B. INJURY AT WORK [ ] YES [ ] NO

30C. DATE OF INJURY MONTH, DAY, YEAR

31. HOUR

32. LOCATION (STREET AND NUMBER OR LOCATION AND CITY)

33. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)

FUNERAL DIRECTOR AND LOCAL REGISTRAR

34A. DISPOSITION(S)	34B. PLACE OF FINAL DISPOSITION—NAME AND ADDRESS	34C. DATE MO. DAY, YEAR	35A. SIGNATURE OF EMBALMER	35B. LICENSE NUMBER
Burial	Oakwood Mem. Park Chatsworth, CA.	1-14-91	Dale Eskamp	4937

36A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)	36B. LICENSE NO.	37. SIGNATURE OF LOCAL REGISTRAR	38. REGISTRATION DATE
J. T. Oswald Mortuary, SF.	FD-889	Robert C. [illegible] MS	JAN 11 1991

STATE REGISTRAR	A.	B.	C.	D.	E.	F.	CENSUS TRACT

VS-11 (REV. 1-90) MAKE NO ERASURES, WHITEOUTS, OR OTHER ALTERATIONS

THIS IS A TRUE CERTIFIED COPY OF THE RECORD FILED IN THE COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES IF IT BEARS THIS SEAL IN PURPLE INK.

JAN 11 1991

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Director of Health Services and Registrar

STATE OF OREGON : COUNTY OF KLAMATH: ss.

Filed for record at request of Jessie G. Camacho the 31st day of March A.D., 19 97 at 2:19 o'clock P. M., and duly recorded in Vol. M97 of Deeds on Page 9261.

FEE $15.00

Bernetha G. Letsch, County Clerk

by Kathleen Rose