DECLARATION UNDER PENALTY OF PERJURY OF RIGHT OF HEIR UNDER THE LAWS OF THE PROBATE CODE OF THE STATE OF CALIFORNIA

I/we,			, declare as follows: That, County of, State of California, on;			
died in the City of		, County	of	ornia, on;		
that a	t the time of the death	of said decedent there	was due said decedent	the sum of		
			Dollars (\$); that said sum of money	
was d	lue to the decedent for	the services of the dec	edent, which services of	consisted of the follo	owing:	
That s	said sum of money wa	s due for the year	, for the month of	,	and/or the partial month(s) of	
		e elapsed since the dea eclaration. (Check one)		hown in a certified	copy of the decedent's death	
	No proceeding is no	ow being or has been co	onducted in California fo	or administration of	the decedent's estate.	
	OR					
	The decedent's Per property described in	•	as consented in writing	to the payment, tra	nsfer, or delivery of the	
13050			al property in California, ceed One Hundred Sixt		erty described in Section o Hundred Fifty Dollars	
	ollowing property is to ribe the funds to be tra		delivered to the undersi	gned according to I	Probate Code 13006	
The S	Successor(s) of the dec	cedent to said sum of m	oney is/are:			

The "Successor" of the decedent is a person(s) who is described by the following: The sole beneficiary or all of the beneficiaries who succeeded to said sum of money of the decedent under the decedent's will; or the trustee of a trust created during the decedent's lifetime under the decedent's will if the trust succeeds to said sum of money under the decedent's will; or if the decedent died without a will, the sole person or all of the persons who succeeded to said sum of money of the decedent under Sections 6401 and/or 6402 of the California Probate Code; or if the law of a sister state or foreign nation governs succession to said sum of money, under the law of the sister state or foreign nation.

The declarant hereby represents and acknowledges that he (or they) is the Successor, as described above, or is authorized under Section 13051 of the California Probate Code to act on behalf of the Successor, with respect to the decedent's interest in the described property.

No other person has a right to the interest of the decedent in the described property.

Declarant therefore asks that all moneys owing to the decedent by the State of California and/or the County of San Joaquin under the applicable laws, rules and regulations of said State and/or County be paid, delivered or transferred to the declarant by the County Auditor and County Treasurer of the County of San Joaquin.

Declarant agrees that he (or they) shall indemnify and hold harmless the said Auditor and Treasurer of the County of San Joaquin, State of California, and the members of the County's Board of Supervisors, the County of San Joaquin, its officers, agents and employees, from and against all demands, claims, damages, losses and expenses and costs, including attorney fees, arising out of and/or resulting from the payment of said money. The declarant(s) at his (or their) own expense and risk shall defend against any and all demands, actions, suits, claims, or other legal proceedings that may be brought or instituted against the said Auditor and Treasurer, the said members of the Board of Supervisors, the

County of San Joaquin, the said officers, agents or employees, arising out of and resulting from the payment of the moneys herein contemplated.

I (OR WE AS THE CASE MAY BE) DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING DECLARATION IS TRUE AND CORRECT. (If more than one declarant is entitled to receive the described property, all need to sign this form. If this is the case, additional declarants can sign below and on an additional page.)

Date	Signed	Print Name	(Davidson)				
Address			(Declarant)				
Date	Signed	Print Name	(Declarant)				
Address							
AUDITOR Corequired.)	ONTROLLER OFFICE - WITNESS SIGNATURE (If	signed in the presenc	e of a Deputy Auditor, Notary not				
Date	Signed	Print Name	Deputy Auditor				
	ACKNOWLE	DGMENT					
certificate who sign is attache validity of	public or other officer completing this everifies only the identity of the individual ed the document to which this certificate ed, and not the truthfulness, accuracy, or f that document. alifornia						
On before me							
(date) (insert name of Notary)							
personally appeared(insert name and title (if applicable) of person appearing)							
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 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_	(Seal)						