DOUGLAS COUNTY, NV

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## Small Estate Affidavit Affidavit for Collection of Property

- I, Richard Chapman, of 1645 Zaldia Drive, Minden, Nevada, 89423-4448, hereinafter known as the "Affiant" certify that all of the following statements are true in regards to the Estate of Thomas Chapman who has passed away in the State of California, County of San Diego:
- 1. Decedent, Thomas Chapman, died on March 3 2021 in the County of San Diego, in the State of California.
- 2. A copy of the decedent's death certificate will be submitted along with this affidavit.
- 3. The value of the assets of the decedent's estate exceeds the estate's known liabilities.
- 4. The Decedent does not have any liabilities and/or debts owed to creditors.
- 5. The value of the decedent's estate does not exceed the monetary limit of \$100,000 for a surviving spouse, and \$25,000 for any other claimant imposed by the State of Nevada.
- 6. There is no pending administration of the decedent's estate.
- 7. There is no reasonable expectation that probate of the decedent's estate is soon to commence.
- 8. The total number of heirs or devisees to the decedent is One (1) identified as:

Richard Chapman is the Decedent's Father and is entitled to the following property: Bank account valued at \$2000,00

There are no additional assets or property of the Decedent.

- 9. All heirs or devisees will be given notice of this affidavit within 30 days of filing.
- 10. This document is governed under the laws in the State of Nevada and shall not be filed with any local authority until the minimum time-period has passed after the death of the Decedent.

Signature of Richard Chapman

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This form has been signed in the presence of a notary public.

Signed and sworn to me on the May 3 2021.

State of Nevada

**County of Douglas** 

I, Shawnyne Gwren, the undersigned authority in and for said County in said State, hereby certify that Richard Chapman, whose name is signed as the Affiant in this small estate affidavit, and who is known in the small estate affidavit, and who is known in the small estate affidavit. to me, acknowledged before me on this day that, being informed of the contents of the said document, (8) he executed the same voluntarily on May 32021.

Given under my hand this May 3 2021.

Notary Public Signature

Printed Name: Shawn yne

State of Nevada

My commission expires:

(Notary Seal)

**NOTARY PUBLIC** STATE OF NEVADA County of Douglas SHAWNYNE GARREN



## **COUNTY OF SAN DIEGO**

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County of San Diego -Health & Human Services Agency - 3851 Rosecrans Street. This is to certify that, if bearing the OFFICIAL SEAL OF THE STATE OF CALIFORNIA, the OFFICIAL SEAL OF SAN DIEGO COUNTY AND THEIR DEPARTMENT OF HEALTH SERVICES EMBOSSED SEAL, this is a true copy of the ORIGINAL DOCUMENT FILED This copy not valid unless prepared on engraved border displaying seal and signature

Wilmed : Waster, M.D.

DATE ISSUED:

4/1/2021 WILMA J. WOOTEN, M.D., M.P.H.
REGISTRAR OF VITAL RECORDS
County of San Diego







## **COUNTY OF SAN DIEGO**

AFFIDAVIT TO AMEND A RECORD 3052021073412 3202137006192 NO ERASURES, WHITEOUTS, PHOTOCOPIES, STATE FILE NUMBER OR ALTERATIONS LOCAL FEGISTRATION NUMBER ☐ BIRTH ☑ DEATH ☐ FETAL DEATH TYPE OR PRINT CLEARLY IN BLACK INK ONLY - THIS AMENDMENT BECOMES AN ACTUAL PART OF THE OFFICIAL RECORD PART I INFORMATION TO LOCATE RECORD 1A NAME FIRST יום אוחם כ 1C. LAST **THOMAS KYLE** CHAPMAN INFORMATION AS IT APPEARS ON <u>ORIGINAL</u> RECORD 7 S=¥ 3 DATE OF EVENT-MUNDICON A CITY OF EVENT M 03/03/2021 FND SAN DIEGO SAN DIEGO 6 FULL NAME OF FATHER PARENT AS STATED ON ORIGINAL RECORD 7 FULL NAME OF MOT-EF/PARENT AS STATED ON ORIGINAL RECORD UNKNOWN UNKNOWN UNKNOWN UNKNOWN UNKNOWN UNKNOWN PART II STATEMENT OF CORRECTIONS TO BIRTH, DEATH, OR FETAL DEATH RECORD 9 INCORRECT INFORMATION THAT APPEARS ON ORIGINAL RECORD 10 CORRECTED INFORMATION AS IT SHOULD APPEAR CORRECTED UNKNOWN 10 LINK NO 11 LIST ONE ITEM PER LINE UNKNOWN NEVER MARRIED SOME COLLEGE BUT NO 12 13 UNKNOWN DEGREE UNKNOWN SERVER 18 UNKNOWN RESTAURANT 19 UNK UNDER INVESTIGATION, RICHARD CHAPMAN, FATHER M.E. OFFICE 27 5570 OVERLAND AVE, SAN 1645 ZALDIA DRIVE, DIEGO, CA 92123 **MINDEN, NV 89423** UNKNOWN UNKNOWN UNKNOWN RICHARD UNKNOWN ALLAN UNKNOW CHAPMAN UNKNOWN LINKNOWN KIMBERLY UNKNOWN TO TAKE OUT OF TEMP ENVAULTMENT REASON FOR We, the undersigned, hereby certify under penalty of perjury that we have personal knowledge of the above facts and that the information given above is true and correct. AFFIDAVITS 12A SIGNATURE OF FIRST PERSON 12B PRINTED NAME 12C TITLE RELATIONSHIP TO PERSON IN PART I VICTORIA MITCHELL SIGNATURES VICTORIA MITCHELL MORTUARY STAFF 12D ADDRESS (STREET and NUMBER, CITY, STATE ZIP) 12E DATE SIGNED MM/DD/CCYY TWO PERSONS 5880 EL CAJON BLVD, SAN DIEGO, CA 92115 03/29/2021 MUST SIGN THIS FORM TO CORRECT A BIRTH, DEATH, OR FETAL 13A SIGNATURE OF SECOND PERSON 13B, PRINTED NAME 13C TITLE/RELATION SHIP TO PERSON IN PART I ►ANGELA BENEFIEL ANGELA BENEFIEL 135. DATE SIGNED-MM/DD/CCYY 13D. ADDRESS (STREET and NUMBER, CITY, STATE, ZIP) 5570 OVERLAND AVENUE, SAN DIEGO, CA 92123-1215 03/29/2021 14. OFFICE OF VITAL RECORDS OR LOCAL REGISTRÁR 15. DATE ACCEPTED FOR REGISTRATION STATE REGISTRAR - OFFICE OF VITAL RECORDS 03/30/2021

STATE OF CALIFORNIA, DEPARTMENT OF PUBLIC HEALTH, OFFICE OF VITAL RECORDS

FORM VS 24e (REV. 1/08) 1.1

County of San Diego —Health & Human Services Agency — 3851 Roscerans Street. This is to certify that, if bearing the OFFICIAL SEAL OF THE STATE OF CALIFORNIA, the OFFICIAL SEAL OF SAN DIEGO COUNTY AND THEIR DEPARTMENT OF HEALTH SERVICES EMBOSSED SEAL, this is a true copy of the ORIGINAL DOCUMENT FILED. This copy not valid unless prepared on engraved border displaying seal and signature of Registrar

Wilmed : Waster, M.D.

DATE ISSUED:

4/1/2021 WILMAI. WOOTEN, M.D., M.P.H. REGISTRAR OF VITAL RECORDS County of San Diego







## **COUNTY OF SAN DIEGO**

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