Karen Johnson Davidson County
Batch# 1247973 AFFIDAVITH
03/19/2025 11:06:30 AM 3 pgs
Fees: $17.00 Taxes: $0.00
20250319-0019633

This Instrument Prepared by:
Natalie Kappert
400 Rouser Road Bldg 2 Ste 500
Coraopolis PA 15108

From Information Furnished by the Parties

AFFIDAVIT OF HEIRSHIP
RE: RUPERTO MAGALLANES

STATE OF California)
COUNTY OF Los Angeles)

COMES, Daisy Martinez Affiant herein, who, after being first duly sworn according to law, deposes and makes oath as follows:

1. That Affiant is at least eighteen (18) years of age;

2. That Affiant is a resident of Los Angeles County, California.

3. That Affiant personally knew Ruperto Magallanes, now deceased, hereinafter referred to as "Decedent", having known him for 21 years, as a personal acquaintance, and has personal knowledge of the life, death and family of the Decedent.

4. That Decedent died on or about 08/27/2012

5. That at the time of Decedent's death, he/she owned an interest in the certain real property situated in Davidson County, Tennessee, commonly known as 617 Tuscarora Ct., Antioch, TN 37013.

6. That decedent was married one time, to Sahara Vazquez, who survived him

7. That the marriage between decedent and Silvia J. Magallanes produced the following children: Cecilia Salas, Martha Magallanes, Jose Magallanes, Manuel Magallanes, Claudia Hernandez, Rosa Magallanes, Juan Magallanes, Carmen Magallanes, and Martin Magallanes

8. That decedent had no other children, natural or adopted.

9. That Affiant has no financial interest in the Estate of Jose Magallanes or the Estate of Ruperto M. Magallanes

10. That this Affidavit of Heirship is freely given with full knowledge that whoever willfully, corruptly, and falsely swears to any statement in any such affidavit, known by such person to be false, or about which such person does not have sufficiently definitive knowledge to justify the making of such a sworn statement, and such statement is false, commits a Class E felony. T.C.A. Section 30-2-712 (2).

11. That Affiant fully understands that this Affidavit of Heirship is being relied upon to authenticate the ownership of the above mentioned property, and Affiant hereby agrees to indemnify any entity/person that incurs damages arising from any false or misleading statement contained in this Affidavit.

FURTHER, AFFIANT SAITH NAUGHT.

Witness my hand and seal on this, the 17th day of DECEMBER, 2024.

Daisy L. Martinez
Daisy Martinez

Sworn to and subscribed before me this ___ day of ___, 2024.

My commission expires: ___

See Attachment
NOTARY PUBLIC

STATE OF _____

COUNTY OF _____

Personally appeared before me, the undersigned, a Notary Public in and for said County and State, **Daisy Martinez**, the within named Affiant, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who, upon oath, acknowledged that she executed the within instrument for the purposes therein contained.

WITNESS MY HAND AND OFFICIAL SEAL this _____ day of _____, 2024.

My commission expires: _____

_____
NOTARY PUBLIC

CALIFORNIA JURAT WITH AFFIANT STATEMENT **GOVERNMENT CODE § 8202**

☑ See Attached Document (Notary to cross out lines 1–6 below)
☐ See Statement Below (Lines 1–6 to be completed only by document signer[s], not Notary)

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____

Signature of Document Signer No. 1 *Signature of Document Signer No. 2 (if any)*

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 that document.

State of California

County of LOS ANGELES

Subscribed and sworn to (or affirmed) before me

on this 17th day of DECEMBER, 2024,
Date *Month* *Year*

by (1) DAISY S. MARTINEZ

(and (2) _____),
Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

CINDY ROSSANA OLMOS
Notary Public - California
Los Angeles County
Commission # 2484392
My Comm. Expires Mar 28, 2028

Place Notary Seal and/or Stamp Above

Signature _____
Signature of Notary Public

OPTIONAL

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

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True Copy Certification
State of Tennessee

I, Amy Mehlmauer, do hereby make oath that I am a licensed attorney and/or the custodian of the original version of the electronic document tendered for registration herewith and that this electronic document is a true and exact copy of the original document executed and authenticated according to law on 12-17-2024

Amy Mehlmauer
Affiant Signature

3-14-2025
Date

Commonwealth of Pennsylvania
County of Allegheny

Sworn to and subscribed before this 14 day of March, 2025.

Notary's Signature

Commonwealth of Pennsylvania - Notary Seal
Abigail Serpa, Notary Public
Allegheny County
My commission expires April 11, 2026
Commission number 1413168
Member, Pennsylvania Association of Notaries

My Commission Expires: 4-11-2026

(seal)