

(Top 3 inches reserved for recording data)

**AFFIDAVIT OF IDENTITY AND SURVIVORSHIP**

State of Minnesota, County of Hennepin

Name of Decedent: **William E. Daley**

I, **Melba D. Daley**, being first duly sworn, on oath state from personal knowledge:

1. That Decedent is the person named in the certified copy of the Certificate of Death attached hereto and made a part hereof.
2. That the name[s] of the survivor[s] [is][are]:
3. That on the date of death, Decedent was an owner as a joint tenant/life tenant of the land legally described as follows:

**Lot 24 Block 12, Blocks 7, 8, 9, 10, 11, 12, 13, 14 & 15 Lewis' (2) Addition; and**

**Lot 24 and the South fifteen feet of Lot 25, Block 12, Blocks 7, 8, 9, 10, 11, 12, 13, 14 & 15 Lewis' (2) Addition.**

Check here if all or part of the described real property is Registered (Torrens)

as shown by instrument recorded on **January 28, 1975** as Document Number **1900992** in the Office of the  County Recorder  Registrar of Titles of **Ramsey** County, Minnesota. (If filed with the Registrar of Titles, insert the Certificate of Title number [...].)

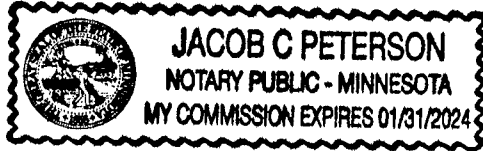
as shown by instrument recorded on **January 28, 1975** as Document Number [month/day/year in the Office of the  County Recorder  Registrar of Titles of **Ramsey** County, Minnesota. (If filed with the Registrar of Titles, insert the Certificate of Title number **263191**.)

Affiant

Melba D. Daley  
Melba D. Daley

Signed and sworn to before me on March 18<sup>th</sup>, 2020, by Melba D. Daley.

(Stamp)



[Signature]  
(signature of notarial officer)  
Title (and Rank): Notary Public  
My commission expires: 01/31/2024  
(month/day/year)

THIS INSTRUMENT WAS DRAFTED BY:  
KELLY AND LEMMONS, P.A.  
2350 Wycliff Street; Suite 200  
St. Paul, MN 55114  
Telephone: 651-224-3781  
Facsimile: 651-223-8019

TAX STATEMENTS FOR THE REAL PROPERTY DESCRIBED IN THIS INSTRUMENT SHOULD BE SENT TO:  
Robert E. Schilling  
677 Sims Avenue  
St. Paul MN 55106