

BK: 2025 PG: 3410  
Recorded: 12/16/2025 at 3:27:59.0 PM  
Pages 3  
County Recording Fee: \$22.00  
Iowa E-Filing Fee: \$3.00  
Combined Fee: \$25.00  
Revenue Tax: \$0.00  
BRANDY L. MACUMBER, RECORDER  
Madison County, Iowa

Prepared by & return to:  
Misha Medeiros  
Summit Settlement Services, LLC  
50 Jordan Street  
East Providence, RI 02914  
(401) 865-6400

Send Tax Notices to:  
Julia Castillo  
605 W Filmore Street, Winterset, IA 50273

\*\*\*THIS TRANSFER IS TAX EXEMPT DUE TO THE CONSIDERATION  
BEING LESS THAN \$500.00\*\*\*

**\*\*I hereby request that the auditor enter this information on the transfer books pursuant to Section 558.66\*\***

Assessor's Parcel Number: 820003603050000 - 0

SPACE ABOVE THIS LINE IS FOR RECORDER'S USE

#### **AFFIDAVIT – DEATH OF JOINT TENANT**

**STATE OF IOWA  
COUNTY OF MADISON**

**JULIA CASTILLO, UNMARRIED**, of legal age, being first duly sworn, deposes and says:

That, **LARRY JULIAN CASTILLO**, the decedent mentioned in Certificate of Death filed in Madison is the same person as **Larry Castillo and Julia Castillo, husband and wife, as joint tenants with full rights of survivorship and not as tenants in common**, named as one of the parties in that certain Deed DATED JULY 9, 2004, RECORDED JULY 16, 2004, IN BOOK: 2004 AND PAGE: 3316, AS DOCUMENT NO. 2004 3316 IN THE OFFICIAL RECORDS OF MADISON COUNTY, IOWA to wit:

THE FOLLOWING-DESCRIBED REAL ESTATE IN MADISON COUNTY, IOWA:

LOTS SEVEN (7) AND EIGHT (8) IN BLOCK THREE (3) OF A.B. SHRIVER'S ADDITION TO THE TOWN OF WINTERSET, MADISON COUNTY, IOWA.  
PARCEL ID NO: 820003603050000 - 0

For Title reference see deed dated July 9, 2004, recorded July 16, 2004, in BOOK: 2004 AND PAGE: 3316, as Document/Instrument No. 2004 3316, in the Official Records of Madison County, State of Iowa.

Commonly known as: 605 W Filmore Street, Winterset, IA 50273

That the value of the decedent's estate was insufficient to necessitate the filing of an estate tax return and that there are no state or federal estate or inheritance tax due as a result of his/her death.

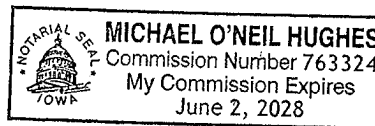
Dated 12-06-2025

Julia J. Castillo  
Julia J Castillo

SUBSCRIBED AND SWORN TO (or affirmed) before me on this 06 day of December  
2025 by JULIA J CASTILLO, to me on the basis of satisfactory  
evidence to be the person(s) who appeared before me.

Michael Hughes  
Notary Signature  
Notary Public Commissioned for said County and State  
State of IOWA MADISON COUNTY

NOTARY SEAL



STATE OF IOWA  
CERTIFICATE OF VITAL RECORD

STATE OF IOWA  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CERTIFICATE OF DEATH

114-2024-026911

BIRTH NUMBER: *Not Available*

DECEDENT INFORMATION

NAME: *Larry Julian Castillo*  
ALIAS:  
PLACE OF BIRTH: *California*  
ARMED FORCES: *No*  
DECEDENT MAIDEN LAST NAME: *Castillo*  
FATHER'S NAME: (prior to any marriage) *Carlos Galvan Castillo*  
MOTHER'S NAME: (prior to any marriage) *Sarah J Uribe*  
RESIDENTIAL ADDRESS: *605 W. Filmore*  
*Winterset, Iowa 50273*  
INFORMANT NAME: *Julia Jo Castillo*  
INFORMANT RELATIONSHIP: *Wife*  
MARITAL STATUS: *Married*  
SURVIVING SPOUSE: (prior to any marriage) *Julia Jo Corlis*

DATE FILED: *11/12/2024*

SSN: **REDACTED**  
SEX: *Male*  
DATE OF BIRTH/AGE: *05/10/1954 70 Years*  
DATE/TIME OF DEATH: *11/06/2024 (Actual)*  
*09:12 PM (Actual)*  
RESIDENCE COUNTY: *Madison*  
COUNTY OF DEATH: *Warren*  
PLACE OF DEATH: *Nursing Home/Long Term Care Facility*  
FACILITY/ADDRESS: *Good Samaritan Society - Indianola*  
*Indianola, Iowa 50125*

MEDICAL CAUSE OF DEATH INFORMATION

IMMEDIATE CAUSE OF DEATH: *Acute Respiratory Failure*  
DUE TO OR AS A CONSEQUENCE OF: *Chronic Respiratory Failure with Hypoxia*  
DUE TO OR AS A CONSEQUENCE OF: *CHRONIC OBSTRUCTIVE PULMONARY DISEASE*  
UNDERLYING CAUSE, IF ANY:  
OTHER SIGNIFICANT CONDITIONS:

INTERVAL UNITS

Minutes  
Months  
Years

MANNER OF DEATH: *Natural*  
AUTOPSY PERFORMED/FINDINGS: *No*

TOBACCO CONTRIBUTED TO DEATH: *Unknown*  
M.E. CONTACTED: *No*

DESCRIPTION OF INJURY: *None*

METHOD OF DISPOSITION: *Cremation*  
PLACE: *Caldwell Parrish Crematory-Urbandale*  
LOCATION: *Urbandale, Iowa*  
FUNERAL DIRECTOR: *Joel Thomas Collins*  
*Caldwell Parrish Winterset Chapel*  
*Winterset, Iowa 50273*

CERTIFIER/TITLE: *Andrea M Hughes*  
DATE CERTIFIED: *11/11/2024*  
CERTIFIER ADDRESS: *1200 Pleasant Street*  
*Des Moines, Iowa 50309*

ARNP

This is to certify that this is a true and correct reproduction of the original record as recorded in this state, issued under the authority of Chapter 144, Code of Iowa.  
This copy is not valid unless prepared on engraved border displaying state seal and signature of the Registrar or Designee.

**THIS COPY NOT VALID UNLESS UNALTERED AND PREPARED ON CERTIFIED SECURITY PAPER**

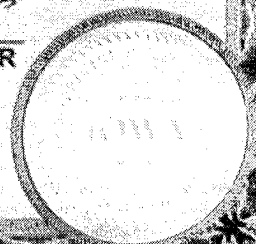
11/12/2024  
DATE ISSUED

*Ch. Mcumber*  
COUNTY REGISTRAR  
County of Issuance: *Madison*

*Melinda A. Ellis*  
DEPUTY STATE REGISTRAR



94594583



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE