

20220401000132860  
04/01/2022 09:36:19 AM  
AFFID 1/3

RECORDING REQUESTED BY:

Name: **LAWRENCE M RICHTER**  
Address: **336 VINCENT STREE**  
City State Zip: **ALABASTER, AL 35007**

PREPARED BY AND RETURN TO:  
Paige Nangle  
Stewart Title Guaranty - Recording  
500 N. Broadway  
St. Louis, MO 63102

(For Further Return To Affiant)

**AFFIDAVIT OF SURVIVORSHIP**

Assessor's Parcel Number: **23 7 26 0 013 020.000**

State of **ALABAMA**  
County of **SHELBY** } ss.

I, **LAWRENCE M RICHTER**, of legal age, being first duly sworn, deposes and says:

That the decedent, **CHARLOTTE RICHTER**, described in the attached certified copy of Certificate of Death is the same person as **CHARLOTTE M. RICHTER**, named as one of the parties in the deed dated **NOVEMBER 6, 2009**, executed by **ADAMS HOMES LLC** to **LAWRENCE M. RICHTER AND WIFE, CHARLOTTE M. RICHTER**, as **JOINT TENANTS**, recorded on **NOVEMBER 10, 2009**, as **INSTRUMENT# 20091110000419690**, of the Official Records of **SHELBY County, ALABAMA**, covering the property situated in **ALABASTER, County of SHELBY, State of ALABAMA**, described as follows:  
**See attached "Exhibit A"**

*Lawrence M Richter*  
Affiant: **LAWRENCE M RICHTER**

Date: *3/25/22*

State of *Alabama*  
County of *Shelby* } ss

SIGNED AND SWORN TO (or affirmed) before me on this *25<sup>th</sup>* day of *March*, 20*22*  
by *Lawrence M. Richter* proved to me on the basis of satisfactory evidence  
to be the persons(s) who appeared before me.

*Kassandra Robinson*  
Notary Signature  
Notary Commission Expires: *5-19-25*

NOTARY STAMP/SEAL

KASSANDER ROBINSON  
Notary Public  
Alabama State at Large

THE FRONT OF THIS DOCUMENT IS PINK - THE BACK OF THIS DOCUMENT IS BLUE AND HAS AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

**ALABAMA**  
**Center for Health Statistics**  
**ALABAMA CERTIFICATE OF DEATH** State File Number **101 2021-08491**

1. DECEASED LEGAL NAME Charlotte Richter						2. DATE AND TIME OF DEATH Feb 12, 2021 1306	
3. ALIAS NAME(IF ANY) None Given						4. DATE AND TIME PRONOUNCED DEAD	
5. COUNTY OF DEATH Shelby		6. CITY, TOWN OR LOCATION OF DEATH AND ZIP CODE Alabaster, 35007			7. PLACE OF DEATH Shelby Baptist Medical Center		
8. SEX Female		9. LAST NAME PRIOR TO FIRST MARRIAGE Maxwell					10. SERVED IN ARMED FORCES No
11. AGE 76	UNDER 1 YEAR MONTHS	UNDER 1 DAY DAYS	HRS	MIN	12. DATE OF BIRTH Jul 30, 1944	13. BIRTHPLACE (State or Foreign Country) Georgia	14. SOCIAL SECURITY NUMBER
15. MARITAL STATUS Married		16. SURVIVING SPOUSE NAME PRIOR TO FIRST MARRIAGE Lawrence Richter				17. RESIDENCE STATE Alabama	
18. RESIDENCE COUNTY Shelby		19. CITY, TOWN OR LOCATION AND ZIP CODE Alabaster, 35007			20. STREET ADDRESS 336 Vincent Street		
21. INFORMANT NAME, RELATIONSHIP AND ADDRESS Lawrence Richter, Husband, 336 Vincent Street, Alabaster, AL 35007							
22. FATHER/PARENT NAME PRIOR TO FIRST MARRIAGE Clyde Winfred Maxwell				23. MOTHER/PARENT NAME PRIOR TO FIRST MARRIAGE Mildred Frances Collins			
24. DISPOSITION OF BODY Cremation		25. CEMETERY OR CREMATORY Charter Crematory			26. LOCATION Calera, Alabama		
27. DATE OF DISPOSITION Feb 14, 2021		28. FUNERAL DIRECTOR OR OTHER AGENT William E Burdett			29. LICENSE NUMBER		30. DATE SIGNED Feb 18, 2021
31. FUNERAL HOME NAME AND ADDRESS Charter Funeral Home and Crematory, 2521 U S Highway 31, Calera, AL 35040						32. LICENSE NUMBER	
33. MEDICAL CERTIFICATION: Certifying Physician							
34. NAME D'Ariel Denise Boykin MD					35. LICENSE NUMBER 34026		36. DATE SIGNED Feb 15, 2021
37. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH 1000 First Street North, Alabaster, Alabama 35007							
38. REGISTRAR Nicole Henderson Rushing						39. DATE FILED Feb 18, 2021	

**CAUSE OF DEATH**

40. PART I. DISEASES, INJURIES OR COMPLICATIONS THAT CAUSED DEATH							INTERVAL	
IMMEDIATE CAUSE  UNDERLYING CAUSE	A. Respiratory Failure DUE TO (OR AS A CONSEQUENCE OF):						days	
	B. Acute respiratory distress syndrome DUE TO (OR AS A CONSEQUENCE OF):						days	
	C. Pneumonia DUE TO (OR AS A CONSEQUENCE OF):						days	
	D. COVID-19						days	
41. PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH Congestive Heart Failure, Shock, Atrial Fibrillation, anemia								
42. MANNER OF DEATH Natural Causes		43. PREGNANT (IF FEMALE)		44. AUTOPSY Unk	45. FINDINGS CONSIDERED Unk	46. TOXICOLOGY Unk	47. FINDINGS CONSIDERED Unk	48. TOBACCO USE CONTRIBUTED TO DEATH No
49. HOW INJURY OCCURRED								
50. DATE AND TIME OF INJURY			51. INJURY AT WORK		52. IF TRANSPORTATION INJURY, SPECIFY			
53. PLACE OF INJURY			54. LOCATION OF INJURY					

ADPH HS E2/REV 01-21

This is an official certified copy of the original record filed in the Center of Health Statistics, Alabama Department of Public Health, Montgomery, Alabama. 2021-156-878-7

February 19, 2021

*Nicole H. Rushing*  
 Nicole Henderson Rushing  
 State Registrar of Vital Statistics

**EXHIBIT "A"**  
**LEGAL DESCRIPTION**

File No.: BACREF22430038

The following described property, lying and being in the County of Shelby, State of Alabama, to-wit:

Lot 20, according to the plat of Southfield Gardens, as recorded in Map Book 38, Page 100 in the Office of the Judge of Probate of Shelby County, Alabama.

Being the same property conveyed to Lawrence M. Richter and wife, Charlotte M. Richter, for and during their joint lives and upon the death of either of them, then to the survivor of them forever by Warranty Deed from Adams Homes, L.L.C., an Alabama limited liability company, dated November 6, 2009, recorded on November 10, 2009 as Instrument 20091110000419690.

APN: 23 7 26 0 013 020.000

Commonly known as: 336 Vincent Street, Alabaster, AL 35007-5063



Filed and Recorded  
Official Public Records  
Judge of Probate, Shelby County Alabama, County  
Clerk  
Shelby County, AL  
04/01/2022 09:36:19 AM  
\$29.00 JOANN  
20220401000132860

*Allen S. Bayl*