1 Department of Commerce 2 3 Adopted Permanent Rules Relating to Uniform Conveyancing Blanks 4 5 Rules as Adopted 2820.0010 Purpose. 6 The purpose of this chapter is to make clear, modern, and 7 uniform forms consistent with the laws of this state available 8 for use in conveying real property in the state. 9 The forms in this chapter have been recommended for use in ·10 Minnesota by the Uniform Conveyancing Blanks Advisory Task Force 11 appointed by the commissioner of commerce under Minnesota 12 Statutes, section 507.09. They have been adopted by the 13 14 commissioner under the rulemaking provisions of Minnasota 15 Statutes, chapter 14. FORMS OF CONVEYANCE FOR 16 GUARDIANS AND CONSERVATORS 17

# [REVISOR ] PMM/MM AR1461

## 04/12/89

4

1 2820.1350 FORM NO. 13-M; GUARDIANS'S DEED.

2 Subpart 1. Recommended form. The recommended form for a 3 guardian's deed is contained in subpart 2.

Subp. 2. Contents.

No delinquent taxes and transfer entered; Certificate of Real Estate Value ( ) filed ( ) not required Certificate of Real Estate Value No	
County Auditor	
byDeputy	
DEED TAX DUE HEREON: \$	
Date:, 19	(reserved for recording data)
FOR VALUABLE CONSIDERATION,	
of the Estate of	, as Guardian(s
	, Ward, single . married
on the date hereof (and)	(spouse of Ward) Grantor(s)
nereby convey(s) to	. Grantee(s)
real property in	

iii more space is needed, commune on backi together with all hereditaments and appurtenances belonging thereto.

	GUARDIAN(S)	
vitis Deet Tax Stamp Here		
STATE OF MINNESOTA	Signature of Spause of Ward	
COUNTY OF		
The foregoing was acknowledged before me this	day of	, 19 ,
as Guardian(s) of the Estate of		, Ward, Grantor(s).
NOTARIAL STAMP OR SEAL (OR OTHER TITLE OR BANK)		
	SIGNATURE OF PERSON TAKI	NG ACKNOWLEDGMENT
STATE OF MINNESOTA		
COUNTY OF SI.		
The foregoing was acknowledged before me this	day of	, 19
by		. spouse of
NOTARIAL STAMP OR SEAL (OR OTHER TITLE OR BANK)		
	SIGNATURE OF PERSON TAK	NG ACKNOWLEDGMENT
	Tax Statements for the real property det sent to (include name and address of Gran	cribed in this instrument should bi tee):
THIS INSTRUMENT WAS DRAFTED BY (NAME AND ADDRESS):		

### [REVISOR ] PMM/MM AR1461

2820.1351 FORM NO. 14-M; GUARDIAN'S DEED TO JOINT TENANTS.
 Subpart 1. Recommended form. The recommended form for a
 guardian's deed to joint tenants is contained in subpart 2.
 Subp. 2. Contents.

Form No. 14-M-GUARDIAN'S DEED Minnesota Uniform Conveyance	nag Blanks
To Joint Tenents	
No delinquent taxes and transfer entered; Certificate of Real Estate Value ( ) filed ( ) not required Certificate of Real Estate Value No	
County Auditor	
byDeputy	
DEED TAX DUE HEREON: \$	
Date:, 19	(reserved for recording data)
FOR VALUABLE CONSIDERATION,	
of the Estate of	
on the date hereof (and)	·
real property in	

(if more space is ne e on back) together with all hereditaments and appurtenances belonging thereto. GUARDIAN(S) Affix Deed Tax Stamp Here STATE OF MINNESOTA Signature of Spouse of Ward SS . COUNTY OF \_\_\_\_ The foregoing was acknowledged before me this \_\_\_\_ \_\_\_\_day of \_ , 19\_ . by as Guardian(s) of the Estate of \_\_\_\_\_ \_, Ward, Grantor(s). NOTARIAL STAMP OR SEAL (OR OTHER TITLE OR RANK) SIGNATURE OF PERSON TAKING ACKNOWLEDGMENT STATE OF MINNESOTA ss. COUNTY OF , 19\_ The foregoing was acknowledged before me this \_\_\_\_ \_\_\_\_ day of \_\_\_\_ , spouse of b**y** \_\_\_ , Ward. NOTARIAL STAMP OR SEAL (OR OTHER TITLE OR RANK) SIGNATURE OF PERSON TAKING ACKNOWLEDGMENT Tax Statements for the real property described in this instrument should be sent to (Include name and address of Grantee); THIS INSTRUMENT WAS DRAFTED BY (NAME AND ADDRESS):

1 2820.1352 FORM NO. 33-M; CONSERVATOR'S DEED.

2 Subpart 1. Recommended form. The recommended form for a 3 conservator's deed is contained in subpart 2.

# 4 Subp. 2. Contents.

Form No. 33-M - CONSERVATOR'S DEED Minnesota Uniform	Conveyancing Blanks
No delinquent taxes and transfer entered; Certificate	
of Real Estate Value ( ) filed ( ) not required	
Certificate of Real Estate Value No, 19	
, 10	
County Auditor	
byDeputy	
DEED TAX DUE HEREON: \$	
Date:, 19	
	(reserved for recording data)
FOR VALUABLE CONSIDERATION,	
of the Estate of	, as Conservator(s
	, Conservatee, single [], married [
on the date hereof (and)	(spouse of Conservates) Grantor(s)
hereby convey(s) to	, Grantee(s)
real property in	County, Minnesota, described as follows
	needed, continue on back)
together with all hereditaments and appurtenances bel	longing thereto.
	CONSERVATOR(S)
Atf x Deed Tax Stamp Here	
STATE OF MINNESOTA	
SS.	Signature of Spouse of Conservates
COUNTY OF)	
The foregoing was acknowledged before me this	day of, 19
by	······································
as Conservator(s) of the Estate of	, Conservatee, Grantor(s)
NOTARIAL STAMP OR SEAL (OR OTHER TITLE OR RANK)	
	SIGNATURE OF PERSON TAKING ACKNOWLEDGMENT
STATE OF MINNESOTA	
state of minnesota	
COUNTY OF \$	
The foregoing was acknowledged before me this	day of, 19
by	, spouse c
	, Conservatee.
NOTARIAL STAMP OR SEAL (OR OTHER TITLE OR RANK)	
	SIGNATURE OF PERSON TAKING ACKNOWLEDGMENT
	Tax Statements for the real property described in this instrument should
	sent to (Include name and address of Grantee):
THIS INSTRUMENT WAS DRAFTED BY (NAME AND ADDRESS):	

2820.1353 FORM NO. 34-M; CONSERVATOR'S DEED TO JOINT TENANTS.
 Subpart 1. Recommended form. The recommended form for a
 conservator's deed to joint tenants is contained in subpart 2.
 Subp. 2. Contents.

Joint Tenants	
No delinquent taxes and transfer entered; Certificate f Real Estate Value ( ) filed ( ) not required Certificate of Real Estate Value No, 19	
County Auditor	
Deputy	
EED TAX DUE HEREON: \$	
ate:, 19	(reserved for recording data)
OR VALUABLE CONSIDERATION,	
	, as Conservator(s
f the Estate of	, Conservatee, single , married
n the date hereof (and)ereby convey(s) to	(spouse of Conservates) Grantor(s)
eal property in	County, Minnesota, described as follows

(if more space is ) together with all hereditaments and appurtenances belo	needed, continue on back) Onging thereto.	
	CONSERVATOR(S)	
stille Deera Tax Stamp Here		
STATE OF MINNESOTA	Signature of Spouse of Conservates	······
COUNTY OF)		
The foregoing was acknowledged before me this		, 19,
as Conservator(s) of the Estate of		
	, C	onservatee, Grantor(s).
NOTARIAL STAMP OR SEAL (OR OTHER TITLE OR RANK)	SIGNATURE OF PERSON TAKING A	CKNOWLEDGMENT
STATE OF MINNESOTA COUNTY OF ss.		
The foregoing was acknowledged before me this	day of	, 19,
b <b>y</b>	. <u></u>	, spouse of
	, Conservatee.	
NOTARIAL STAMP OR SEAL (OR OTHER TITLE OR RANK)		
	SIGNATURE OF PERSON TAKING A	CKNOWLEDGMENT
	Tax Statements for the real property describe sent to (include name and address of Grantee):	
THIS INSTRUMENT WAS DRAFTED BY (NAME AND ADDRESS):		

1

TRUSTEE	'S	DEEDS
---------	----	-------

2820.2700 FORM NO. 37-M; TRUSTEE'S DEED BY INDIVIDUAL. 2 Subpart 1. Recommended form. The recommended form for a 3 trustee's deed by individual is contained in subpart 2. 4 Subp 2 Content 5

Su	pp.	2.	contents.
----	-----	----	-----------

Form No. 37-M - TRUSTEE'S DEED	Minnesota Uniform Conveyance	ng Blanks
By Individual(s)		
No delinquent taxes and transfer er of Real Estate Value ( ) filed ( Certificate of Real Estate Value No , 19	) not required	
	County Auditor	
by	Deputy	
DEED TAX DUE HEREON: \$		
Date:	, 19	(reserved for recording data)
FOR VALUABLE CONSIDERATION	ON,	
······································		, as Trustee(s) of
	(Name of Trust	,
		, Grantor(s)
	•	, Grantee(s
		County, Minnesota, described as follows

real property in \_\_\_\_

(if more space is needed, continue on back) together with all hereditaments and appurtenances belonging thereto.

$\chi^{12}$ s , e.e. Fix Stamp Here	
STATE OF MINNESOTA	
COUNTY OF	
b <b>y</b>	
as Trustee(s) of	ame af Trust)
	, Grantor(s).
NOTARIAL STAMP OR SEAL (OR OTHER TITLE OR RANK)	
	SIGNATURE OF PERSON TAKING ACKNOWLEDGMENT
	Tax Statements for the real property described in this instrument should be sent to (Include name and address of Grantee):
THIS INSTRUMENT WAS DRAFTED BY (NAME AND ADDRESS):	
	•

04/12/89

2820.2701 FORM NO. 38-M; TRUSTEE'S DEED BY INDIVIDUAL TO JOINT
 TENANTS.
 Subpart 1. Recommended form. The recommended form for a
 trustee's deed by an individual to joint tenants is contained in
 subpart 2.
 Subp. 2. Contents.

Form No. 38-M - TRUSTEE'S DEED Minnesota Uniform	m Conveyancing Blanks
By Individual to Joint Tenants	
No delinquent taxes and transfer entered; Certificate	
of Real Estate Value ( ) filed ( ) not required	
Certificate of Real Estate Value No.	
, 19	
County Auditor	
h	
by Deputy	
	→
DEED TAX DUE HEREON: \$	
Deter 10	
Date:, 19	
	(reserved for recording data)
FOR VALUABLE CONSIDERATION,	
·	
	, as Trustee(s) of
4)	Name of Trust)
······································	, Grantor(s),
hereby convey(s) to	
real property in	, Grantees as Joint Tenants, County, Minnesota, described as follows: 
	, Grantees as Joint Tenants, County, Minnesota, described as follows:
(If more space is	
(If more space is	County, Minnesota, described as follows:
(If more space is	County, Minnesota, described as follows:
(If more space is	County, Minnesota, described as follows:
(If more space in cogether with all hereditaments and appurtenances be	County, Minnesota, described as follows:
(If more space is	County, Minnesota, described as follows:
(If more space in together with all hereditaments and appurtenances be	County, Minnesota, described as follows:
(17 more space is together with all hereditaments and appurtenances be Affix Deed Tax Stamp Here	County, Minnesota, described as follows:
(if more space in together with all hereditaments and appurtenances be	County, Minnesota, described as follows:
(If more space in cogether with all hereditaments and appurtenances be Affix Deed Tax Stamp Here STATE OF MINNESOTA	County, Minnesota, described as follows:
(If more space in cogether with all hereditaments and appurtenances be Affix Deed Tax Stamp Here STATE OF MINNESOTA	County, Minnesota, described as follows:
(If more space is cogether with all hereditaments and appurtenances be Affix Deed Tax Stamp Here STATE OF MINNESOTA COUNTY OF	County, Minnesota, described as follows:
(If more space in cogether with all hereditaments and appurtenances be Affix Deed Tax Stamp Here STATE OF MINNESOTA COUNTY OF	County, Minnesota, described as follows:
(If more space is together with all hereditaments and appurtenances be Affix Deed Tax Stamp Here STATE OF MINNESOTA COUNTY OF	County, Minnesota, described as follows:
(if more space in together with all hereditaments and appurtenances be Affix Deed Tax Stamp Here STATE OF MINNESOTA COUNTY OF	County, Minnesota, described as follows:
(if more space in together with all hereditaments and appurtenances be Affix Deed Tax Stamp Here STATE OF MINNESOTA COUNTY OF	County, Minnesota, described as follows:
(If more space in together with all hereditaments and appurtenances be Affix Deed Tax Stamp Here STATE OF MINNESOTA COUNTY OF	County, Minnesota, described as follows:
(If more space in sogether with all hereditaments and appurtenances be Affix Deed Tax Stamp Here STATE OF MINNESOTA COUNTY OF	County, Minnesota, described as follows: needed, continue on back) clonging thereto. TRUSTEE(S) day of, 19, eme of Trust)
(If more space in cogether with all hereditaments and appurtenances be Affix Deed Tax Stamp Here STATE OF MINNESOTA COUNTY OF	County, Minnesota, described as follows: needed, continue on back) clonging thereto. TRUSTEE(S) day of, 19, eme of Trust)

SIGNATURE OF PERSON TAKING ACKNOWLEDGMENT Tax Statements for the real property described in this instrument should be sent to (Include name and address of Grantee):

THIS INSTRUMENT WAS DRAFTED BY (NAME AND ADDRESS):

7

1	2820.2702 FORM NO. 39-M; TRUSTEE'S	DEED BY CORPORATION.
2	Subpart 1. Recommended form.	The recommended form for a
3	trustee's deed by a corporation is	contained in subpart 2.
4	Subp. 2. Contents.	

Form No. 39-M - TRUSTEE'S DEED Uniform Conveya	
By Corporation	
No delinquent taxes and transfer entered; Certificate	
of Real Estate Value ( ) filed ( ) not required	
Certificate of Real Estate Value No, 19	
County Auditor	
county Auditor	
by	
Deputy	
DEED TAX DUE HEREON: \$	
· · · · · · · · · · · · · · · · · · ·	
Date:, 19	
	(reserved for recording data)
FOR VALUABLE CONSIDERATION,	
	, as Trustee of
	; as Itustee 0.
(Name of T	rust)
	, Grantor(s)
hereby convey(s) to	
	, Granceers)

#### (if more space is needed, continue on back) together with all hereditaments and appurtenances belonging thereto.

TRUSTEE

1 - Claert Fix Stamp Here			
STATE OF MINNESOTA	By		
COUNTY OF	ss. Its		
The foregoing instrument was ackno	wledged before me this	day of	, 19,
by	and	· · · · · · · · · · · · · · · · · · ·	,
of			
under the laws of		, on be	half of the corporation
as Trustee of	(Name of Trust)		
			, Gran tor(s).
NOTARIAL STAMP OB SEAL (OR OTHER TIT	LE OR RANK)		

SIGNATURE OF PERSON T	AKING ACKNOWLEDGMENT
Tax Statements for the real property be sent to (Include name and address of	ty described in this instrument should of Grantee):

THIS INSTRUMENT WAS DRAFTED BY (NAME AND ADDRESS):

1	2820.2703 FORM NO. 40-M; TRUSTEE'S DEED BY CORPORATION TO JOINT
2	ͲͲΝΔΝͲϚ
3	Subpart 1. Recommended form. The recommended form for a
4	trustee's deed by a corporation to joint tenants is contained in
5	subpart 2.
6	Subp. 2. Contents.
	Form No. 40-M - TRUSTEE'S DEED Minnesota Coucorm Lon Hospital Blanks
	By Corporation to Joint Tenants
	No delinquent taxes and transfer entered; Certificate of Real Estate Value ( ) filed ( ) not required Certificate of Real Estate Value No
	County Auditor
	by Deputy
	DEED TAX DUE HEREON: \$
	Date:, 19 , 19 (reserved for recording data)
	FOR VALUABLE CONSIDERATION.
	, as Trustee of
	(Name of Trust)
	hereby convey(s) to, Grantees as Joint Tenants,
	real property in County, Minnesota, described as follows:
	(if more space is needed, continue on back) together with all hereditaments and appurtenances belonging thereto.
	TRUSTEE
	N. Stand Stand
	By Its
	STATE OF MINNESOTA
	STATE OF MINNESOTA By COUNTY OF Ss. Its
	COUNTY OF ss. Its tay of, 19,
	COUNTY OF
	COUNTY OF
	SS.       Its         The foregoing instrument was acknowledged before me this day of 19         by
	SS.       Its         The foregoing instrument was acknowledged before me this day of 19         by

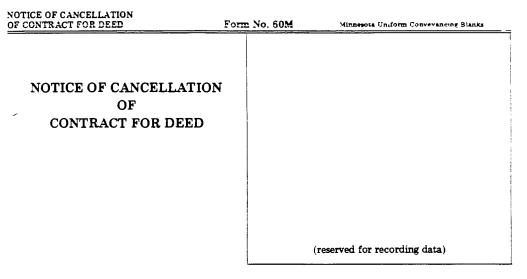
THIS INSTRUMENT WAS DRAFTED BY (NAME AND ADDRESS):

2820.4700 FORM NO. 60M; NOTICE OF CANCELLATION OF CONTRACT FOR
 DEED.

3 Subpart 1. Recommended form. The recommended form for a 4 notice of cancellation of a contract for deed is contained in

5 subpart 2.

6 Subp. 2. Contents.



#### YOU ARE NOTIFIED:

<ol> <li>Default has occurred in the</li> </ol>	Contract for D	eed ("Contract") dated	, 19,
and filed for record		, as Document Number	
(or in Book	of	Page	), in the Office of the
(County Recorder) (Registrar of Title in which			County, Minnesota,
as seller(s), sold to			,
as purchaser(s), the real property in_			County, Minnesota,

described as follows:

2. The default is as follows:

4. The conditions contained in Minnesota Statutes  $\S\,559.209$  have been complied with or are not applicable.

5. THIS NOTICE IS TO INFORM YOU THAT BY THIS NOTICE THE SELLER HAS BEGUN PROCEEDINGS UNDER MINNESOTA STATUTES, SECTION 559.21, TO TERMI-NATE YOUR CONTRACT FOR THE PURCHASE OF YOUR PROPERTY FOR THE REASONS SPECIFIED IN THIS NOTICE. THE CONTRACT WILL TERMINATE DAYS AFTER (SERVICE OF THIS NOTICE UPON YOU) (THE FIRST DATE OF PUBLICATION OF THIS NOTICE) UNLESS BEFORE THEN:

## (A) THE PERSON AUTHORIZED IN THIS NOTICE TO RECEIVE PAYMENTS RECEIVES FROM YOU:

- (1) THE AMOUNT THIS NOTICE SAYS YOU OWE; PLUS
- (2) THE COSTS OF SERVICE (TO BE SENT TO YOU); PLUS
- (3) <u>S</u> TO APPLY TO ATTORNEYS' FEES ACTUALLY EXPENDED OR INCURRED; PLUS
- (4) FOR CONTRACTS EXECUTED ON OR AFTER MAY 1, 1980, ANY ADDITIONAL PAYMENTS BECOMING DUE UNDER THE CONTRACT TO THE SELLER AFTER THIS NOTICE WAS SERVED ON YOU; PLUS
- (5) FOR CONTRACTS EXECUTED ON OR AFTER AUGUST 1, 1985, S (WHICH IS TWO PERCENT OF THE AMOUNT IN DEFAULT AT THE TIME OF SERVICE OTHER THAN THE FINAL BALLOON PAYMENT, ANY TAXES, ASSESSMENTS, MORTGAGES, OR PRIOR CONTRACTS THAT ARE ASSUMED BY YOU); OR
- (8) YOU SECURE FROM A COUNTY OR DISTRICT COURT AN ORDER THAT THE TER-MINATION OF THE CONTRACT BE SUSPENDED UNTIL YOUR CLAIMS OR DEFENSES ARE FINALLY DISPOSED OF BY TRIAL, HEARING OR SETTLEMENT. YOUR ACTION MUST SPECIFICALLY STATE THOSE FACTS AND GROUNDS THAT DEMONSTRATE YOUR CLAIMS OR DEFENSES.

IF YOU DO NOT DO ONE OR THE OTHER OF THE ABOVE THINGS WITHIN THE TIME PERIOD SPECIFIED IN THIS NOTICE, YOUR CONTRACT WILL TERMINATE AT THE END OF THE PERIOD AND YOU WILL LOSE ALL THE MONEY YOU HAVE PAID ON THE CONTRACT; YOU WILL LOSE YOUR RIGHT TO POSSESSION OF THE PROPERTY; YOU MAY LOSE YOUR RIGHT TO ASSERT ANY CLAIMS OR DEFENSES THAT YOU MIGHT HAVE; AND YOU WILL BE EVICTED. IF YOU HAVE ANY QUESTIONS ABOUT THIS NOTICE, CONTACT AN ATTORNEY IMMEDIATELY.

# 6. YOU MAY BE ELIGIBLE FOR AN EXTENSION OF THE TIME PRIOR TO TERMINATION UNDER MINNESOTA STATUTES SECTIONS 583.01 TO 583.12.

7. The name, address and telephone number of the seller or of an attorney authorized by the seller to accept payments pursuant to this notice is:

□ Seller □ Attorney for Seller

Address:\_\_\_\_\_\_

Telephone: (\_\_\_\_\_)

This person is authorized to receive the payments from you under this notice.

Signature [Optional - See Minn. Stat. \$559.21, subd.4(e)]

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4

AFFIDAVIT OF PE	IRSONAL SERVICE
STATE OF MINNESOTA	
County of \$ ss.	
•	
, 19, I served the foregoing	ing notice upon
, Coun	nty of personally at
State of Minnesota, by handing to and leaving with	
	, a true and correct copy thereof
Subscribed and sworn to before me this, 19,	
	NOTARY STAMP OR SEAL (OR OTHER TITLE OR RANK)
SIGNATURE OF NOTARY PUBLIC OR OTHER OFFICIAL	
AFFIDAVIT OF SUB	STITUTED SERVICE
STATE OF MINNESOTA	
> ss.	
County of)	
. 19	, being duly sworn on oath says that: on
	by leaving a true and correct copy thereof at his
or her usual place of abode with a person of suitable age and discretion then residing th	lerein.
Subscribed and sworn to before me this	
day of , 19	NOTARY STAMP OR SEAL (OR OTHER TITLE OR RANK)
SIGNATURE OF NOTARY PUBLIC OR OTHER OFFICIAL	
SHERIFF'S RETURN O	F PERSONAL SERVICE
STATE OF MINNESOTA	
County of \$ ss.	
I hereby certify and return that in the	-f
in said County and State on	, 19, I served the foregoing notice upon
leaving with	personally by handing to and a true and correct copy thereof.
Dated: , 19	
FEES: Service \$ Mileage \$	Sheriff of County, Minnesota
TOTAL \$	By, Deputy
SHERIFF'S RETURN OF	SUBSTITUTED SERVICE
STATE OF MINNESOTA	
County of )	
I hereby certify and return that in the	of
in said County and State on	, 19, I served the foregoing notice upor
thereof at his or her usual place of abode with	and the second
a person of suitable age and discretion then residing th	erein.
Dated:, 19	
FEES: Service \$	
Mileage \$	Sheriff of County, Minnesota
TOTAL \$	By, Deputy
	by, Deputy

Ť

AFFIDAVIT OF SERVICE ON OCCUPANT	AFFIDAVIT	OF SERVICE	ON OCCUPANT
----------------------------------	-----------	------------	-------------

County of, 19, I went upo purpose of serving the notice upon the persons in p was/were in possession of the real estate; and on sai 	d day I served the notice on
purpose of serving the notice upon the persons in p was/were in possession of the real estate; and on sai by handing to and leaving with	n the real estate described in the foregoing notice for the ossession thereof; on said date
was/were in possession of the real estate; and on sai by handing to and leaving with a true and correct copy thereof. Subscribed and sworn to before me this	d day I served the notice on
by handing to and leaving with a true and correct copy thereof. Subscribed and swom to before me this	
a true and correct copy thereof. Subscribed and swom to before me this	NOTARY STAMP OR SEAL (OR OTHER TITLE OR RANK)
a true and correct copy thereof. Subscribed and swom to before me this	NOTARY STAMP OR SEAL (OR OTHER TITLE OR RANK)
	NOTARY STAMP OR SEAL (OR OTHER TITLE OR RANK)
SIGNATURE OF NOTARY PUBLIC OR OTHER OFFICIAL	
	r of vacancy
STATE OF MINNESOTA	
County of)	
purpose of serving the notice on the persons in p vacant and unoccupied.	, being duly sworn on oath says that: n the real estate described in the foregoing notice for the possession thereof; and on said date the real estate was
Subscribed and sworn to before me this	NOTARY STAMP OR SEAL (OR OTHER TITLE OR RANK)
SIGNATURE OF NOTARY PUBLIC OR OTHER OFFICIAL	
AFFIDAVIT OF FAILURE	TO COMPLY WITH NOTICE
STATE OF MINNESOTA	
the person authorized to receive payments; more th notice on	, being duly sworn on oath says that: I amdays have elapsed since the service of the; the terms of the notice have not been
	tice still continues. I make this affidavit for the purpose stice, the proofs of the service of the notice, and this
Subscribed and sworn to before me this	
day of, 19	NOTARY STAMP OR SEAL (OR OTHER TITLE OR RANK)
SIGNATURE OF NOTARY PUBLIC OR OTHER OFFICIAL THIS INSTRUMENT WAS DRAFTED BY (NAME AND ADDRESS	