



Phone (800) 718-4853

Prepared For:

Todd Wohl
Braun Co.
438 Pacific Coast Hwy
Hermosa Beach, CA 90254

Property Profile

Property Address: **VIC AVE H6 165 STE
LANCASTER, CA 93535**

Assessor's Parcel No: **3358-009-118**

Title Representative: **LARRY CHRISTIAN / GARY BREGMAN**



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OLD REPUBLIC TITLE COMPANY**

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Property Information

Primary Owner : ESCOTO MEGHAN
Secondary Owner : BARRY SAPHILOFF TRUST
Site Address : VIC AVE H6 165 STE
LANCASTER, CA 93535-
Mailing Address : 918 CLEARVIEW ST
TEHACHAPI, CA 93561-2353
Assessor Parcel Number : 3358-009-118
Census Tract : N/A
Housing Tract Number : N/A
Lot Number : N/A
Page Grid : -
Legal Description : Abbreviated Description: SEC/TWN/RNG/MER:SEC 09 TWN 07N RNG 09W
NE 1/4 OF SE 1/4 OF NW 1/4 OF NE 1/4 OF SEC 9 T7N R 9W

Property Characteristics

Bedrooms : 0 **Year Built :** N/A **Square Feet :** 0
Bathrooms : 0.0 **Garage :** N/A **Lot size :** 2.5 AC
Partial Bath : 0 **Fireplace :** N/A **Number of Units :** 0
Total Rooms : 0 **Pool/Spa :** N **Use Code :** Agricultural-Unimproved
Zoning : LCA11*
Vacant Land

Sale Information

Transfer Date : 03/28/2023 **Document # :** 23-0195504
Transfer Value : N/A **Cost/Sq Feet :** N/A

Assessment/Tax Information

Assessed Value : \$23,452 **Tax Amount :** \$310.67
Land Value : \$23,452 **Tax Status :** Current
Improvement Value : \$0 **Tax Rate Area :** 3-449
Percent Improvement : 0 % **Homeowner Exemption :** N

Los Angeles, California

Searched: 3358-009-118

Non-Order Search

 Tax Year: 2025-2026
 Tax Cover: 10/03/2025
 Searched By: TOM DEBRULER
 Searched On: 10/15/2025 8:37 PM

Company: OLD REPUBLIC TITLE COMPANY | GLENDALE | 11 | CRN: 00070-00021

Customer Service Request Only**Information is sourced from public records and is deemed reliable, but is not guaranteed.**

APN:	3358-009-118		
Described As:	NE 1/4 OF SE 1/4 OF NW 1/4 OF NE 1/4 OF SEC 9 T7N R 9W		
Address:	VAC/VIC AVE H6/165 STE		
City:	UNINCORPORATED - COUNTY OF LOS ANGELES		
Billing Address:	918 CLEARVIEW ST TEHACHAPI CA 93561		
Assessed Owner(s):	ESCOTO,MEGHAN TR BARRY SAPHILOFF TRUST		
Search As:	Tax ID 3358-9 of Parcel 118		

Tax Rate Area:	03449	Value	Conveyance Date:
Use Code:	580V	Land: 23,452.00	Conveying Instrument:
DRY FARM - DESERT		Improvements:	Date Transfer Acquired:
Region Code:	ANTELOPE VALLEY	Personal Property:	Vesting:
Flood Zone:		Fixtures:	Year Built:
Zoning Code:	LCA11*	Inventory:	Year Last Modified:
Taxability Code:			
Tax Rate:	1.324705	Exemptions	Square Footage
Auditor Tax Rate:	1.174484	Homeowner:	Land:
		Inventory:	Improvements:
		Personal Property:	
		Religious:	
		All Other:	Tax Defaulted:
Bill #:		Net Taxable Value: 23,452.00	Total Tax: 310.67
Issue Date:	03/06/2026		

Installment	Amount	Penalty	Due Date	Status	Payment Date	Balance
1st	155.34	15.53	04/30/2026	UNPAID		155.34
2nd	155.33	25.53	04/30/2026	UNPAID		155.33
Total Balance:						310.67

Account	Special Lien Description	Amount
00311	COUNTY LIBRARY SERVICES	35.23

THE INFORMATION PROVIDED IS A SUMMARIZED SEARCH OF OUR RECORDS. PROPERTY INSIGHT DOES NOT WARRANT NOR GUARANTEE THE ACCURACY NOR COMPLETENESS OF THE INFORMATION SHOWN. A FULL/EXTENDED TAX SEARCH IS RECOMMENDED.

***** END OF REPORT *****



SUBJECT PROPERTY HISTORY

Prior Transfer

Recording Date:	04/07/2023	Document #:	23-0222695
Price:		Document Type:	Intrafamily Transfer & Dissolution
First TD:		Type of Sale:	Transfer Tax on doc. indicated as
Lender Name:			
Buyer Name:	ESCOTO, MEGHAN; THE BARRY SAPHILOFF LIVING TRUST,		
Buyer Vesting:	Living Trust		
Sell Name:	SAPHILOFF, BARRY		
City/Muni/Twp:	TEHACHAPI		
Legal:	CITY:UNINCORPORATED SEC/TWN/RNG/MER:NE4SW4NE4 S33T08NR09W SBBM		

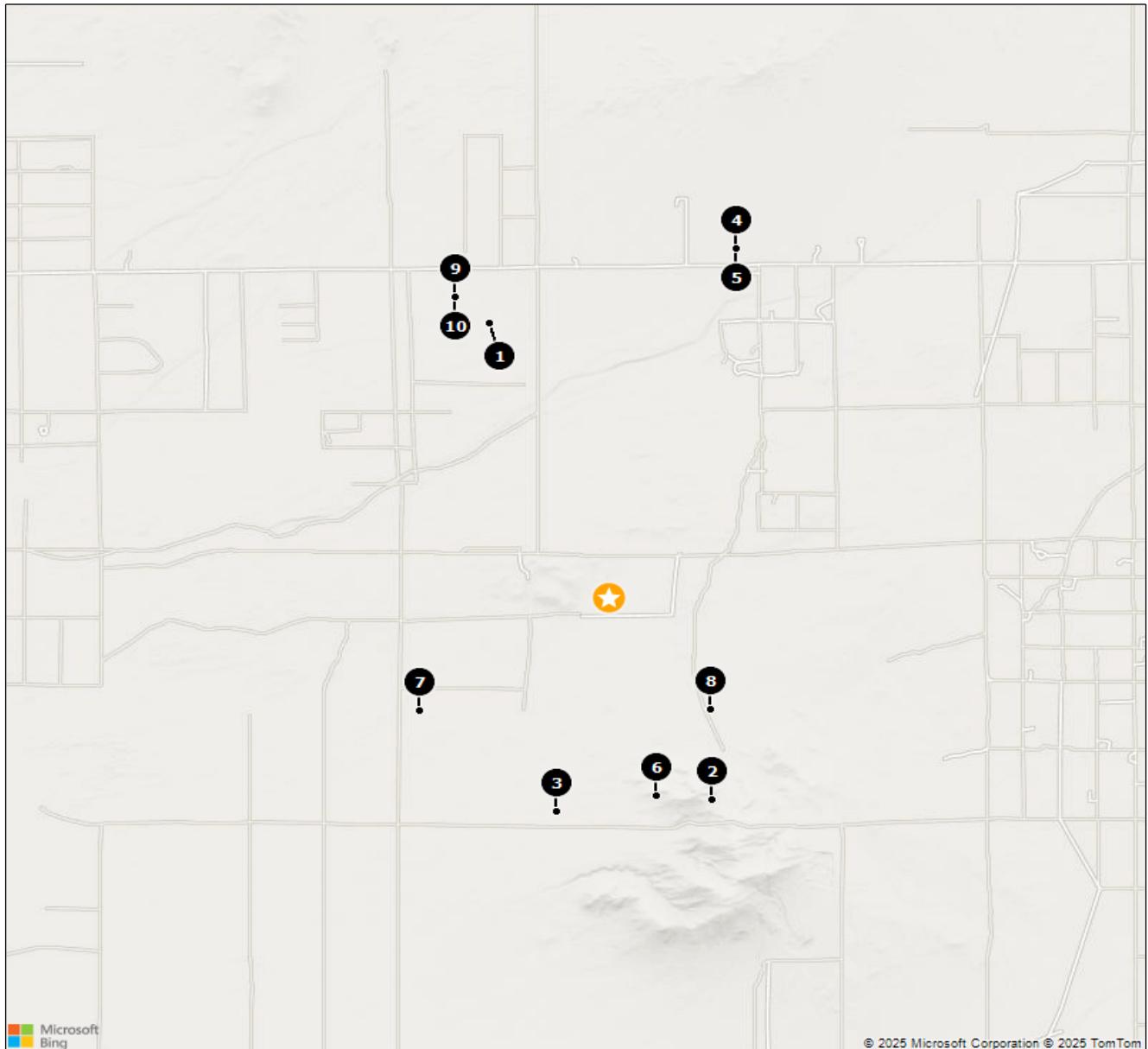
Prior Transfer

Recording Date:	03/28/2023	Document #:	23-0195504
Price:		Document Type:	Aff Death JT
First TD:		Type of Sale:	Price as "0", "None", "No
Lender Name:			
Buyer Name:	SAPHILOFF, BARRY		
Buyer Vesting:			
Sell Name:	SAPHILOFF, BARRY; SAPHILOFF, BRIDGET		
City/Muni/Twp:	TEHACHAPI		
Legal:	SEC/TWN/RNG/MER:NE4SW4NE4 S09T07NR09W		

Prior Transfer

Recording Date:	02/06/2003	Document #:	
Price:		Document Type:	N/A
First TD:		Type of Sale:	Price Per Public Records
Lender Name:	N/A		
Buyer Name:	N/A		
Buyer Vesting:			
Sell Name:	N/A		
City/Muni/Twp:	N/A		
Legal:	SEC/TWN/RNG/MER:SEC 09 TWN 07N RNG 09W NE 1/4 OF SE 1/4 OF NW 1/4 OF NE 1/4 OF SEC 9 T7N R 9W		

**VIC AVE H6 165 STE
LANCASTER, CA 93535-**



Address	Date	Price	SqFt	BR/Bth	Year Built	Lot Size
1. Vic Ave G4 165 Ste, Lancaster	05/05/2025	\$11,500	0	0		2.643
2. Vic Ave I 170 Ste, Lancaster	04/28/2025	\$1,500	0	0		2.584
3. Cor Ave I Drt 165 Ste, Lancaster	03/25/2025	\$16,000	0	0		4.367
4. Ave G Vic 172 Ste, Hi Vista	03/24/2025	\$35,000	0	0		2.376
5. Ave G Vic 172 Ste, Hi Vista	03/21/2025	\$19,500	0	0		2.376
6. Ave H12 Vic 165th Ste, Lancaster	01/23/2025	\$33,500	0	0		39.558
7. 160 Ste Drt Vic Ave H8, Lancaster	01/16/2025	\$7,381	0	0		2.535
8. Vic Ave H8 170th Ste, Lancaster	10/09/2024	\$25,000	0	0		10.336

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9. Vic Ave G 160 Ste, Lancaster	08/02/2024	\$8,000	0	0	2.746
10. Vic Ave G 160 Ste, Lancaster	07/16/2024	\$3,000	0	0	2.746



Criteria Selected:

Searched by Radius: 1 Mile
Date Range: 4/23/2024 to 10/15/2025
Land Use: Same as Subject

Area Sales Analysis

	Low	Median	High
Bedrooms:	0	0	0
Baths:	0	0	0
Lot Size:	2	3	40
Living Area (SqFt):	0	0	0
Sale Price:	\$1,500	\$13,750	\$35,000
Year Built:	0	0	0
Age:	0	0	0

Subject Property

Sale Date: 03/28/2023 **Year Built:** N/A **Price:** N/A **Pool:** N
Lot Size: 2.5 AC **Square Feet:** N/A **\$/SF:** N/A **BR/Bth:** 0/0.0

Comparable Sales Data

No.	Address	Date	Price	\$/SF	SqFt	BR/Bth	Year Built	Lot Size	Pool
1	VIC AVE G 165 STE LANCASTER, CA 93535	05/05/2025	\$11,500	\$0	0	0		2.64 AC	N/A
	Owner: CORNEJO, JAVIER ADONIS LOPEZ; LOPEZ APN: 3358-007-051 Legal: Sec/Twnship/Range:NW4 S04T07NR09W Abbreviated Description:PORTION LOT2 Land Use: Agricultural-Unimproved Vacant Land		Seller: EAGLE DESERT VISTA CORPORATION, Document #: 25-0291845						
									Located approximately 1.10 miles from subject property.
2	VIC AVE I 170 STE LANCASTER, CA 93535	04/28/2025	\$1,500	\$0	0	0		2.58 AC	N/A
	Owner: GUTIERREZ, NAPOLES APN: 3350-014-049 Legal: Sec/Twnship/Range:N2S2SW4SW4SW4 S10T07NR09W Land Use: Agricultural-Unimproved Vacant Land		Seller: FREEMAN, DEBORAH ANN Document #: 25-0275787						
									Located approximately 0.83 miles from subject property.
3	COR AVE I DRT 165 STE LANCASTER, CA 93535	03/25/2025	\$16,000	\$0	0	0		4.37 AC	N/A
	Owner: PHELPS, SINDA APN: 3358-009-028 Legal: Sec/Twnship/Range:S2S2W2W2W2SE4 S09T07NR09W SBBM City/Muni/Twp:UNINCORPORATED Land Use: Agricultural-Unimproved Vacant Land		Seller: KIEFERLAND LLC, Document #: 25-0189708						
									Located approximately 0.81 miles from subject property.
4	AVE G VIC 172 STE HI VISTA, CA 93535	03/24/2025	\$35,000	\$0	0	0		2.38 AC	N/A
	Owner: GERBER, GLORIA NELLY; GUTIERREZ, APN: 3316-020-051 Legal: Sec/Twnship/Range:E2W2E2S2SW4SW4 S34T08NR09W SBM City/Muni/Twp:HI VISTA Land Use: Agricultural-Unimproved Vacant Land		Seller: KARPERS INVESTMENTS LLC, Document #: 25-0184124						
									Located approximately 1.37 miles from subject property.

Comparable Sales Data

No.	Address	Date	Price	\$/SF	SqFt	BR/Bth	Year Built	Lot Size	Pool
5	AVE G VIC 172 STE HI VISTA, CA 93535	03/21/2025	\$19,500	\$0	0	0		2.38 AC	N/A
	Owner: KARPERS INVESTMENTS LLC, APN: 3316-020-051 Legal: Sec/Twnship/Range:E2W2E2S2SW4SW4 S34T08NR09W SBM City/Muni/Twp:UNINCORPORATED Land Use: Agricultural-Unimproved Vacant Land		Seller: ALRF2 LLC, Document #: 25-0182972 Located approximately 1.37 miles from subject property.						
6	AVE H12 VIC 165TH STE LANCASTER, CA 93535	01/23/2025	\$33,500	\$0	0	0		39.56 AC	N/A
	Owner: GOVINDARAJ, RAJKUMAR; NARASIMHAN, APN: 3358-009-033 Legal: Sec/Twnship/Range:SE4SE4 S09T07NR09W SBBM City/Muni/Twp:UNINCORPORATED Land Use: Agricultural-Unimproved Vacant Land		Seller: BENINK, ERIC J Document #: 25-0044830 Located approximately 0.76 miles from subject property.						
7	160 STE DRT VIC AVE H8 LANCASTER, CA 93535	01/16/2025	\$7,381	\$0	0	0		2.54 AC	N/A
	Owner: DEKLE, ELVIN R APN: 3358-009-069 Legal: Sec/Twnship/Range:W2N2S2N2NW4SW4 S09T07NR09W SBM City/Muni/Twp:UNINCORPORATED Land Use: Agricultural-Unimproved Vacant Land		Seller: WPL HOLDINGS LLC, Document #: 25-0032785 Located approximately 0.78 miles from subject property.						
8	VIC AVE H8 170TH STE LANCASTER, CA 93535	10/09/2024	\$25,000	\$0	0	0		10.34 AC	N/A
	Owner: VALENZUELA, HUGO ROLANDO SOLARES; APN: 3350-014-007 Legal: Sec/Twnship/Range:NW4NW4 S10T07NR09W SBBM City/Muni/Twp:UNINCORPORATED Land Use: Agricultural-Unimproved Vacant Land		Seller: HAREL, REUVEN; THE REUVEN HAREL Document #: 24-0690179 Located approximately 0.54 miles from subject property.						
9	VIC AVE G 160 STE LANCASTER, CA 93535	08/02/2024	\$8,000	\$0	0	0		2.75 AC	N/A
	Owner: LIMA, LILIANA APN: 3358-007-025 Legal: Sec/Twnship/Range:NW4 S04T07NR09W SBM Abbreviated Description:PORTION LOT2 Land Use: Agricultural-Unimproved Vacant Land		Seller: HOME EQUITY OPTIONS LLC, Document #: 24-0517370 Located approximately 1.24 miles from subject property.						
10	VIC AVE G 160 STE LANCASTER, CA 93535	07/16/2024	\$3,000	\$0	0	0		2.75 AC	N/A
	Owner: HOME EQUITY OPTIONS LLC, APN: 3358-007-025 Legal: Lot:1 Sec/Twnship/Range:NW43 S04T07NR09W Abbreviated Description:PORTION LOT2 Land Use: Agricultural-Unimproved Vacant Land		Seller: GOVINDARAJU, MAJORKUMAR Document #: 24-0467294 Located approximately 1.24 miles from subject property.						

**IRA SERVICES TRUST COMPANY CSTDN****170 STE DRT VIC AVE H4 STE
LANCASTER, CA 93535**

APN: 3358-009-067 Bedrooms: 0
Square Feet: 0 Bathrooms: 0
Year Built: Lot size: 10
Sale Date: 11/01/2013 Garage:
Land Use: Agricultural-Unimproved Vacant Land

ANDERSON JULIE M**170 VIC AVE H4
HI VISTA, CA 93535**
APN: 3350-013-079 Bedrooms: 0
Square Feet: 0 Bathrooms: 0
Year Built: Lot size: 3
Sale Date: 08/28/2007 Garage:
Land Use: Agricultural-Unimproved Vacant Land**NGUYEN HIEP T & MARY C****VIC AVE H4 171 STE
HI VISTA, CA 93535**
APN: 3350-013-064 Bedrooms: 0
Square Feet: 0 Bathrooms: 0
Year Built: Lot size: 5
Sale Date: 04/05/1988 Garage:
Land Use: Agricultural-Unimproved Vacant Land**IMAM KHALID****VIC AVE H 172 STE
HI VISTA, CA 93535**
APN: 3350-013-038 Bedrooms: 0
Square Feet: 0 Bathrooms: 0
Year Built: Lot size: 10
Sale Date: 01/20/2021 Garage:
Land Use: Agricultural-Unimproved Vacant Land**BADUA JOSEFINA M****VIC AVE H7 182 STE
HI VISTA, CA 93535**
APN: 3350-013-058 Bedrooms: 0
Square Feet: 0 Bathrooms: 0
Year Built: Lot size: 3
Sale Date: 05/25/2022 Garage:
Land Use: Agricultural-Unimproved Vacant Land**IMAM KHALID****VIC AVE H 170 STE
HI VISTA, CA 93535**
APN: 3350-013-036 Bedrooms: 0
Square Feet: 0 Bathrooms: 0
Year Built: Lot size: 10
Sale Date: 01/20/2021 Garage:
Land Use: Agricultural-Unimproved Vacant Land**IMAM KHALID****VIC AVE H 171 STE
HI VISTA, CA 93535**
APN: 3350-013-037 Bedrooms: 0
Square Feet: 0 Bathrooms: 0
Year Built: Lot size: 20
Sale Date: 01/20/2021 Garage:
Land Use: Agricultural-Unimproved Vacant Land**SHIN JEONG HEE****VIC AVE H4 172 STE
HI VISTA, CA 93535**
APN: 3350-013-060 Bedrooms: 0
Square Feet: 0 Bathrooms: 0
Year Built: Lot size: 3
Sale Date: 11/18/2002 Garage:
Land Use: Residential-Vacant Land**SHIN JEONG HEE****VIC AVE H4 172 STE
HI VISTA, CA 93535**
APN: 3350-013-059 Bedrooms: 0
Square Feet: 0 Bathrooms: 0
Year Built: Lot size: 3
Sale Date: 10/26/1982 Garage:
Land Use: Residential-Vacant Land**JUNG DAVID****VIC AVE H2 182 STE
HI VISTA, CA 93535**
APN: 3350-013-053 Bedrooms: 0
Square Feet: 0 Bathrooms: 0
Year Built: Lot size: 3
Sale Date: 04/26/2007 Garage:
Land Use: Agricultural-Unimproved Vacant Land

This page is part of your document - DO NOT DISCARD

03-0362849

RECORDED/FILED IN OFFICIAL RECORDS
RECORDER'S OFFICE
LOS ANGELES COUNTY
CALIFORNIA

FEB 06 2003

AT 8 A.M.

TITLE(S) :

DEED



L E A D S H E E T

FEE

D.T.T

FEE
\$7
SS

CODE

20

CODE

19

CODE

9

SURVEY, MONUMENT FEE \$10. CODE 9

NOTIFICATION SENT-
©

Assessor's Identification Number (AIN)

To be completed by Examiner OR Title Company in black ink.

Number of Parcels Shown

3 3 1 4 - 0 0 7 - 0 9 0

0 0 1

THIS FORM NOT TO BE DUPLICATED

RECORDING REQUESTED BY

03 0362849

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE
SHOWN BELOW, MAIL TAX STATEMENT TO:

Name **Barry & Bridget Saphiloff**
Street Address **29920 Goldspike Rd**
City & State & Zip **Tehachapi, CA 93561**

Title Order No. _____ Escrow No. _____

SPACE ABOVE THIS LINE FOR RECORDER'S USE

GRANT DEED

**THIS IS A BONIFIDE GIFT AND THE GRANTOR RECEIVED
NOTHING IN RETURN, R/T 11911.**

The undersigned grantor declares that the documentary transfer tax is \$ **0** and is
 computed on the full value of the interest or property conveyed, or is
 computed on the full value less the value of liens or encumbrances remaining thereon at the time of sale. The land, tenements or
realty is located in
 unincorporated area city of **H. VISTA AREA OF L.A. COUNTY**

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

Philip and Anna Katsof, as joint tenants
hereby GRANT(S) to

This document filed for recording by Equity
Title Company as an accomodation only.
It has not been examined as to its execution,
or as to its effect upon the title.

HARRY SAPHILOFF AND BRIDGET SAPHILOFF AS JOINT TENANTS

the following described real property in the
county of **Los Angeles**, state of California:

The Northeast quarter of the Southeast quarter of the Northwest
quarter of the Northeast quarter Section 9 Township 7 North Range
9 West S.B.B.M.

RESERVING THEREFROM an easement of thirty-two (32) feet on the
Northerly and Easterly of said land, for Roadway, Public Utilities
and Sanitary Sewer purposes.

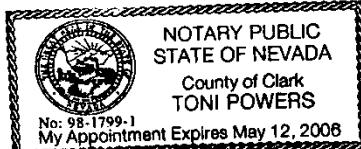
Dated 10/31/02

STATE OF CALIFORNIA *Clark*
COUNTY OF *Clark* } S.S.
On October 31, 2002 before me,
Toni Powers
a Notary Public in and for said County and State, personally appeared
Philip Katsof
Anna Katsof

personally known to me (or proved to me on the basis of satisfactory evidence)
to be the person(s) whose name(s) are subscribed to the within instrument
and acknowledged to me that he/she they executed the same in his/her
their authorized capacity(ies), and that by his/her/their signature(s) on the
instrument the person(s), or the entity upon behalf of which the person(s) acted,
executed the instrument.

WITNESS my hand and official seal

Signature *Toni Powers*



(This area for official notarial seal)

ET-137 (REV. 4-94)

MAIL TAX STATEMENTS TO PARTY SHOWN ON FOLLOWING LINE: IF NO PARTY SO SHOWN, MAIL AS DIRECTED ABOVE

Name

Street Address

City & State

4

▲ This page is part of your document - DO NOT DISCARD ▲



20230195506



Pages:
0004

Recorded/Filed in Official Records
Recorder's Office, Los Angeles County,
California

03/28/23 AT 01:55PM

FEES :	28.00
TAXES :	0.00
OTHER :	0.00
SB2 :	75.00
<hr/>	
PAID :	103.00



LEADSHEET



202303280660009

00023309493



013989483

SEQ:
03

DAR - Courier (Upfront Scan)



THIS FORM IS NOT TO BE DUPLICATED

E269970

RECORDING REQUESTED BY

Barry Saphiloff

WHEN RECORDED MAIL TO

Barry Saphiloff
C/O Derryberry & Associates, LLP
41240 11TH Street West, Suite A
Palmdale, CA 93551

SPACE ABOVE THIS LINE RESERVED FOR RECORDER'S USE

T I T L E(S)

AFFIDAVIT OF DEATH OF JOINT TENANT

Recording Requested By

Barry Saphiloff

WHEN RECORDED MAIL THIS DOCUMENT TO
MAIL TAX STATEMENTS TO

Barry Saphiloff
918 Clearview Street
Tehachapi, California 93561

APN: 3314-007-090

SPACE ABOVE THIS LINE FOR RECORDER'S USE

AFFIDAVIT OF DEATH OF JOINT TENANT

STATE OF CALIFORNIA
COUNTY OF LOS ANGELES

Barry Saphiloff, (who inadvertently acquired title as Harry Saphiloff) of legal age, being first duly sworn according to law, deposes and says:

That **Brigid Ann Saphiloff**, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as **Brigid Saphiloff** named as one of the parties in that certain GRANT DEED dated October 31, 2002, executed by PHILIP AND ANNA KATSOFF, AS JOINT TENANTS, TO HARRY SAPHILOFF AND BRIDGET SAPHILOFF AS JOINT TENANTS,

Through a Scrivener's error title was confirmed to "HARRY SAPHILOFF" and recorded as Instrument No. 03-0362849 on February 06, 2003, of Official Records of Los Angeles County, California, covering the following described property is situated in the County of Los Angeles, State of California:

The Northwest quarter of the Southeast quarter of the Northwest quarter of the Northeast quarter
Section 9, Township 7 North, Range 9 West, S.B.B.M.

RESERVING THEREFROM an easement of thirty-two (32) feet on the Northerly and Easterly of said land, for Roadway, Public Utilities and Sanitary Sewer Purposes.

Also known as: Vacant Land, California 93535; APN: 3314-007-090.

Dated: March 10, 2023

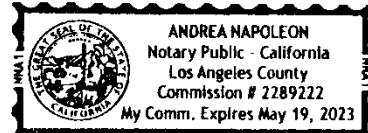
Barry Saphoff by Meghan Escoto, as his attorney in fact
Barry Saphoff by Meghan Escoto, as his Attorney in Fact. attorney in fact
ficate verifies only the identity of the individual who signed the

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 10th day of March 2023, by MEGHAN ESCOTO, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature: (Seal)



MAIL TAX STATEMENTS TO THE ADDRESS NOTED ABOVE

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

3052014150484

CERTIFICATE OF DEATH

3201415003275

STATE FILE NUMBER		CERTIFICATE OF DEATH		LOCAL REGISTRATION NUMBER	
STATE OF CALIFORNIA USE BLACK INK ONLY NO ENHANCES, WHITENERS OR ALTERATIONS 16-14029 (3/04)					
1. NAME OF DECEDENT - FIRST (Given) BRIDGET		2. MIDDLE ANN		3. LAST (Family) SAPHILOFF	
AKA: ALSO KNOWN AS - Include all AKA (First, Middle, Last)		4. DATE OF BIRTH (mm/dd/yyyy) 02/09/1952		5. AGE Yrs 62	6. UNDER ONE YEAR Weeks _____ Days _____ Hours _____ Minutes _____
7. BIRTH STATE/FOREIGN COUNTRY NY		8. SOCIAL SECURITY NUMBER 1517		9. EVER IN U.S. ARMED FORCES <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	10. MARRIED (Established at Time of Death) MARRIED
11. EDUCATION - Highest Level/Degree (Leave uncheck if less than 6th grade)		12. MARTIN'S EQUIVALENT (If less than 6th grade)		13. DECEASED'S RACE - Up to 3 races may be listed (see worksheet on back) CAUCASIAN	
14. WAS DECEDENT HISPANIC/LATINO/A/SPANISH? If yes, indicate on back MASTER'S <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		15. DECEASED'S GENDER - Male or Female MALE		16. DATE OF DEATH (mm/dd/yyyy) 08/11/2014	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED SCHOOL DISTRICT NURSE		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) MEDICAL		19. YEARS IN OCCUPATION 13	
20. DECEASED'S RESIDENCE (Street and number, or location) 2200 STEVEN CT.					
21. CITY BAKERSFIELD		22. COUNTY/PROVINCE KERN		23. ZIP CODE 93306	24. YEARS IN COUNTY 20
25. INFORMANT'S NAME/RELATIONSHIP BARRY SAPHILOFF, HUSBAND		26. INFORMANT'S MAILING ADDRESS (Street and number, or route number, city or town, state and zip) 2200 STEVEN CT., BAKERSFIELD, CA 93306			
27. SPONSORSHIP AND PARENT INFORMATION		28. NAME OF SURVIVING SPOUSE/STEP-FATHER BARRY			
		29. MIDDLE - - -			
		30. LAST (BIRTH NAME) SAPHILOFF			
31. NAME OF FATHER/PARENT-FIRST DAVID		32. MIDDLE - - -		33. LAST MCBRIDE	34. BIRTH STATE IRELAND
35. NAME OF MOTHER/PARENT-FIRST PHYLLIS		36. MIDDLE - - -		37. LAST (BIRTH NAME) POTVIN	38. BIRTH STATE MA
39. DEPOSITION DATE (mm/dd/yyyy) 08/18/2014		40. PLACE OF FINAL DISPOSITION RESIDENCE OF BARRY SAPHILOFF 2200 STEVEN CT., BAKERSFIELD, CA 93306			
41. TYPE OF DISPOSITIONS CR/RES		42. SIGNATURE OF EMBALMER ► NOT EMBALMED		43. LICENSE NUMBER FD1405	
44. NAME OF FUNERAL ESTABLISHMENT WOOD FAMILY FUNERAL SERVICE, INC		45. SIGNATURE OF LOCAL REGISTRAR ► CLAUDIA JONAH, MD		46. DATE mm/yyyy 08/18/2014	
47. PLACE OF DEATH SAN JOAQUIN COMMUNITY HOSPITAL		48. IF HOSPITAL, SPECIFY ONE <input checked="" type="checkbox"/> X <input type="checkbox"/> ERCP <input type="checkbox"/> DCA <input type="checkbox"/> HOSPIC <input type="checkbox"/> Nursing <input type="checkbox"/> Residential <input type="checkbox"/> Home <input type="checkbox"/> Other		49. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
50. COUNTY KERN		51. ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) 2615 CHESTER AVE.		52. CITY BAKERSFIELD	
53. CAUSE OF DEATH IMMEDIATE CAUSE (Final disease or condition resulting in death) ► CARDIOPULMONARY ARREST		54. TIME INTERVAL BETWEEN DEATH AND DEATH (AT) MINS		55. CAUSE REPORTED TO CORONER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
56. SEQUELAE, IF any, resulting from the death on Line 53 ► RESPIRATORY FAILURE		57. TIME INTERVAL BETWEEN DEATH AND DEATH (AT) HRS		58. BIOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
59. UNDERLYING CAUSE (diseases that may have preceded the events resulting in death) ► RENAL FAILURE		60. TIME INTERVAL BETWEEN DEATH AND DEATH (AT) UNK		61. AUTOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
62. HYPERKALEMIA		63. TIME INTERVAL BETWEEN DEATH AND DEATH (AT) UNK		64. USED IN DETERMINING CAUSE? <input type="checkbox"/> YES <input type="checkbox"/> NO	
65. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE UNDERLYING CAUSE GIVEN IN 60 METASTATIC NEUROENDOCRINE CARCINOMA					
66. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 60 OR 61? (if yes, list type of operation and date) NO					
67. IF FEMALE, PREGNANT IN LAST YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK					
68. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE (I OCCUPIED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED) Decedent Attended Shows Decedent Last Seen Alive		69. SIGNATURE AND TITLE OF CERTIFIER ► RUSHABH SHAH, MD		70. LICENSE NUMBER A122686	71. DATE mm/yyyy 08/16/2014
72. TIME OF DEATH 08/11/2014		73. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE RUSHABH SHAH, MD 2615 CHESTER AVE., BAKERSFIELD, CA 93301		74. INJURY DATE mm/yyyy 75. HOUR (24 Hours)	
76. MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending investigation <input type="checkbox"/> Could not be determined		77. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN		78. INJURY DATE mm/yyyy 79. HOUR (24 Hours)	
80. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)					
81. DECRIBE HOW Y INJURY OCCURRED (Explain which resulted in death)					
82. LOCATION OF INJURY (Street and number, or location, and city, and zip)					
83. SIGNATURE OF CORONER / DEPUTY CORONER ►			84. DATE mm/dd/yyyy MAR 20 2023	85. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER	
STATE REGISTRAR	A	B	C	D	E
				FAX AUTH# 010001002711435	
				CENSUS TRACT	

CERTIFIED COPY OF VITAL RECORD

STATE OF CALIFORNIA, COUNTY OF KERN

This is a true and exact reproduction of the document officially registered and placed on file with the Kern County Recorder.

DATE ISSUED

MAR 20 2023

This copy is not valid unless prepared on an engraved border displaying the date, seal and signature of the County Recorder

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



Laura Avila
LAURA AVILA
ASSESSOR RECORDER

Requested By: tdebruler, Printed: 10/15/2025 5:47 PM

CAKERN - 02

▲ This page is part of your document - DO NOT DISCARD ▲



20230195504



Pages:
0004

Recorded/Filed in Official Records
Recorder's Office, Los Angeles County,
California

03/28/23 AT 01:55PM

FEES :	28.00
TAXES :	0.00
OTHER :	0.00
SB2 :	75.00
<hr/> PAID :	103.00



LEADSHEET



202303280660009

00023309491



013989483

SEQ:
01

DAR - Courier (Upfront Scan)



THIS FORM IS NOT TO BE DUPLICATED

E269970

RECORDING REQUESTED BY

Barry Saphiloff

WHEN RECORDED MAIL TO

Barry Saphiloff
C/O Derryberry & Associates, LLP
41240 11TH Street West, Suite A
Palmdale, CA 93551

SPACE ABOVE THIS LINE RESERVED FOR RECORDER'S USE

T I T L E(S)

AFFIDAVIT OF DEATH OF JOINT TENANT

Recording Requested By

Barry Saphiloff

WHEN RECORDED MAIL THIS DOCUMENT TO
MAIL TAX STATEMENTS TO

Barry Saphiloff
918 Clearview Street
Tehachapi, California 93561

APN 3358-009-118

SPACE ABOVE THIS LINE FOR RECORDER'S USE

AFFIDAVIT OF DEATH OF JOINT TENANT

STATE OF CALIFORNIA
COUNTY OF LOS ANGELES

Barry Saphiloff, of legal age, being first duly sworn according to law, deposes and says:

That **BrIDGET ANN SAPHILOFF**, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as **BrIDGET SAPHILOFF** named as one of the parties in that certain GRANT DEED dated October 31, 2002, executed by PHILIP AND ANNA KATSOF, AS JOINT TENANTS, TO BARRY SAPHILOFF AND BRIDGET SAPHILOFF AS JOINT TENANTS, recorded as Instrument No. 03-0362850 on February 06, 2003, of Official Records of Los Angeles County, California, covering the following described property is situated in the County of Los Angeles, State of California:

3 1/4 Acres More or Less: on Ave. F-4, the Southeast Corner of Ave. F-4 and 166th Street East, legally described as:

PARCEL #4

The West 495 feet of the North 330 feet of the Northeast quarter of the Southwest quarter of the Northeast quarter of Section 33, Township 8 North, Range 9 West, S.B.B.M. Except the west 330 feet of the South 66 feet. As per map attached. RESERVING THEREFROM an easement of thirty-two (32) feet over the Northerly & Westerly portions thereof, for Road and Utility purposes.

Also known as: Vacant Land, California 93535; APN: 3358-009-118

Dated: March 10, 2023

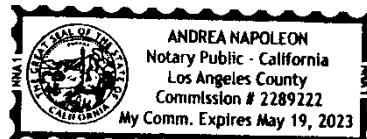
Barry Saphiloff by Meghan Escoto, as his attorney in fact

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 10th day of March 2023, by MEGHAN ESCOTO, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature: (Seal)



MAIL TAX STATEMENTS TO THE ADDRESS NOTED ABOVE

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

3052014150484

CERTIFICATE OF DEATH

STATE OF CALIFORNIA
USE BLACK INK ONLY / DO NOT USE INK ERASERS OR ALTERATIONS
VS-1987 (REV. 10-87)

3201415003275

LOCAL REGISTRATION NUMBER

STATE FILE NUMBER		1. NAME OF DECEASED - FIRST (Given) BRIDGET		2. MIDDLE ANN		3. LAST (Family) SAPHILOFF	
DECEASED'S PERSONAL DATA		4. DATE OF BIRTH (mm/dd/yyyy) 02/09/1952		5. AGE yrs. 62		6. UNDER ONE YEAR Months _____ Days _____	
6. BIRTH STATE/FOREIGN COUNTRY NY		18. SOCIAL SECURITY NUMBER 1517		11. EVER IN U.S. ARMED FORCES <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		12. MARRITAL STATUS/SPD* (At Time of Death) MARRIED	
13. EDUCATION - Highest Level/Degree obtained on death MASTER'S		14/15. WAS DECEASED HISPANIC/LATINO/A/SPANISH? If yes, see worksheet on back <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. DECEASED'S RACE - Up to 3 races may be listed (see worksheet on back) CAUCASIAN		7. DATE OF DEATH (mm/dd/yyyy) 08/11/2014	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED SCHOOL DISTRICT NURSE		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) MEDICAL		19. YEARS IN OCCUPATION 13			
20. DECEASED'S RESIDENCE (Street and number, or location) 2200 STEVEN CT.		21. CITY BAKERSFIELD		22. COUNTY/PROVINCE KERN		23. ZIP CODE 93306	
24. YEARS IN COUNTY 20		25. STATE/FOREIGN COUNTRY CA		26. INFORMANT'S NAME, RELATIONSHIP BARRY SAPHILOFF, HUSBAND		27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) 2200 STEVEN CT., BAKERSFIELD, CA 93306	
28. NAME OF SURVIVING SPOUSE/SPD* - FIRST BARRY		29. MIDDLE -		30. LAST (BIRTH NAME) SAPHILOFF		31. BIRTH STATE IRELAND	
32. NAME OF MOTHER/PARENT - FIRST DAVID		33. MIDDLE -		34. LAST MCBRIE		35. BIRTH STATE MA	
36. NAME OF MOTHER/PARENT - FIRST PHYLLIS		37. MIDDLE -		38. LAST (BIRTH NAME) POTVIN		39. BIRTH STATE MA	
40. DEPOSITION DATE (mm/dd/yyyy) 08/18/2014		41. PLACE OF FINAL DISPOSITION RESIDENCE OF BARRY SAPHILOFF 2200 STEVEN CT., BAKERSFIELD, CA 93306		42. SIGNATURE OF EMBALMER ► NOT EMBALMED		43. LICENSE NUMBER -	
44. NAME OF FUNERAL ESTABLISHMENT WOOD FAMILY FUNERAL SERVICE, INC		45. LICENSE NUMBER FD1405		46. SIGNATURE OF LOCAL REGISTRAR ► CLAUDIA JONAH, MD		47. DATE (mm/dd/yyyy) 08/18/2014	
48. PLACE OF DEATH SAN JOAQUIN COMMUNITY HOSPITAL		49. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) 2615 CHESTER AVE.		50. IF HOSPITAL, SPECIFY ONE <input checked="" type="checkbox"/> F <input type="checkbox"/> EMOP <input type="checkbox"/> DDA <input type="checkbox"/> Hospital <input type="checkbox"/> Nursing <input type="checkbox"/> Doctor's Home <input type="checkbox"/> Other		51. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> Doctor's Home <input type="checkbox"/> Other	
52. COUNTY KERN		53. CITY BAKERSFIELD		54. TIME INTERVAL BETWEEN DEATH AND FINDING 07 MINS		55. DEATH RELATED TO COVID-19 <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> RETURNED TO OWNER	
56. CAUSE OF DEATH Enter the chain of events -- disease, injuries, or complications -- that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE		57. RESPIRATORY FAILURE		58. HRS		59. BIPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
59. UNDERLYING CAUSE (isease or injury that resulted in the events resulting in death LAST)		60. RENAL FAILURE		61. UNK		62. AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
63. HYPERKALEMIA		64. UNK		65. UNK		66. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input type="checkbox"/> NO	
67. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 METASTATIC NEUROENDOCRINE CARCINOMA							
68. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date) NO							
69. IF PREGNANT IN LAST YEAR <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK							
70. PHYSICIAN'S CERTIFICATION I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED Deceased Attended Since _____ Deceased Last Seen Alive _____		71. SIGNATURE AND TITLE OF CERTIFIER RUSHABH SHAH, MD		72. LICENSE NUMBER A122686		73. DATE (mm/dd/yyyy) 08/16/2014	
74. DATE (mm/dd/yyyy) 08/11/2014		75. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE RUSHABH SHAH, MD 2615 CHESTER AVE., BAKERSFIELD, CA 93301		76. MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending <input type="checkbox"/> Could not be determined		77. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
78. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		79. DATE (mm/dd/yyyy) 08/11/2014		80. INJURY DATE (mm/dd/yyyy) 08/11/2014		81. HOUR (24 Hours) 08	
82. DATE (mm/dd/yyyy) 08/11/2014		83. SIGNATURE OF CORONER / DEPUTY CORONER ►		84. DATE (mm/dd/yyyy) 08/11/2014		85. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER ►	
86. STATE REGISTRAR A B C D E		87. DATE (mm/dd/yyyy) 08/11/2014		88. FAX AUTH# 010001002711435		89. CENSUS TRACT	

CERTIFIED COPY OF VITAL RECORD STATE OF CALIFORNIA, COUNTY OF KERN

This is a true and exact reproduction of the document officially registered and placed on file with the Kern County Recorder.

MAR 20 2023

DATE ISSUED

This copy is not valid unless prepared on an engraved border displaying the date, seal and signature of the County Recorder

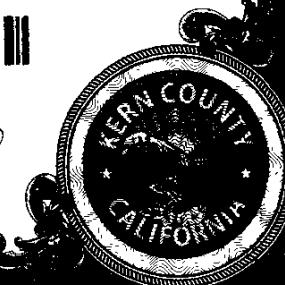
ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

CAKERN - 02



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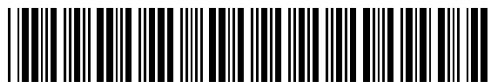
Laura Avila
ASSESSOR RECORDER



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20230222695



Pages:
0004

Recorded/Filed in Official Records
Recorder's Office, Los Angeles County,
California

04/07/23 AT 10:25AM

FEES :	40.00
TAXES :	0.00
OTHER :	0.00
SB2 :	75.00
<hr/>	
PAID :	115.00



LEADSHEET



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SEQ:
01

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E269970

RECORDING REQUESTED BY

Barry Saphiloff

WHEN RECORDED MAIL TO

Barry Saphiloff
C/O Derryberry & Associates, LLP
41240 11TH Street West, Suite A
Palmdale, CA 93551

SPACE ABOVE THIS LINE RESERVED FOR RECORDER'S USE

T I T L E(S)

TRUST TRANSFER DEED

Recording Requested By

Barry Saphiloff

WHEN RECORDED MAIL THIS DOCUMENT TO:
MAIL TAX STATEMENTS TO:

Barry Saphiloff
918 Clearview Street
Tehachapi, California 93561

APN: 3358-009-118, APN: 3302-004-030 and APN: 3314-007-090

SPACE ABOVE THIS LINE FOR RECORDER'S USE

TRUST TRANSFER DEED

The undersigned Grantor declares that the following is true and correct:

- This transfer is exempt from the documentary transfer tax. This conveyance transfers an interest into or out of a Living Trust. Cal. Rev. & Tax. Code § 11930. Tax due: \$0.00.
- The property is located in the Unincorporated area of Los Angeles County.

FOR NO CONSIDERATION, GRANTORS: **Barry Saphiloff, a widower,** hereby grants to **Meghan Escoto (formally known as Meghan Saphiloff)** as Trustee of **THE BARRY SAPHILOFF LIVING TRUST**, dated December 14, 2022 the following real property in the County of **Los Angeles**, State of California:

SEE "EXHIBIT A" ATTACHED HERETO

Commonly Known as: APN: 3358-009-118; APN: 3302-004-030 and APN: 3314-007-090

Dated: March 10, 2023

Barry Saphiloff by Meghan Escoto, as his attorney in fact

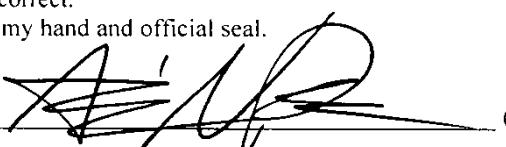
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

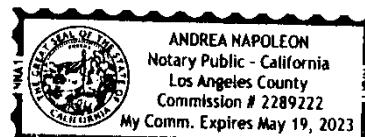
STATE OF CALIFORNIA §
COUNTY OF LOS ANGELES §

On March 10th 2023, before me, Andrea Napoleon, a Notary Public, personally appeared MEGHAN ESCOTO who proved to me on the basis of satisfactory evidence to be the persons whose names are subscribed to the within instrument and acknowledged to me that she executed the same in her authorized capacity, and that by her signature on the instrument the person, or the entity upon behalf of which the persons acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature:  (Seal)



MAIL TAX STATEMENTS TO THE ADDRESS NOTED ABOVE

Exhibit A

3 1/4 Acres More or Less: on Ave. F-4, the Southeast Corner of Ave. F-4 and 166th Street East, legally described as:

PARCEL #4

The West 495 feet of the North 330 feet of the Northeast quarter of the Southwest quarter of the Northeast quarter of Section 33, Township 8 North, Range 9 West, S.B.B.M. Except the west 330 feet of the South 66 feet. As per map attached. RESERVING THEREFROM an easement of thirty-two (32) feet over the Northerly & Westerly portions thereof, for Road and Utility purposes.

Also known as: Vacant Land, California 93535

APN: 3358-009-118

The Northwest one quarter of the Northwest one quarter of the Southwest one quarter of the Southwest one quarter of Section 22, Township 8 North, Range 11 West, S.B.B.M.

RESERVING THEREFROM an easement of fifty (50) feet on the westerly portion and thirty-two (32) feet on the Northerly portion of said land for Roadway, Public Utilities and Sanitary Sewer Purposes.

Also known as: Vacant Land, California 93535

APN: 3302-004-030

The Northwest quarter of the Southeast quarter of the Northwest quarter of the Northeast quarter Section 9, Township 7 North, Range 9 West, S.B.B.M.

RESERVING THEREFROM an easement of thirty-two (32) feet on the Northerly and Easterly of said of said land for Roadway, Public Utilities and Sanitary Sewer Purposes.

Also known as: Vacant Land, California 93535

APN: 3314-007-090.

MAIL TAX STATEMENTS TO THE ADDRESS NOTED ABOVE

