

WHEN RECORDED, RETURN TO:

David O. Parkinson
Callister Nebeker & McCullough
Parkview Plaza I
2180 South 1300 East #600
Salt Lake City UT 84106-2813

Parcel No. 17-065-0005

D - 47133

AFFIDAVIT OF SURVIVORSHIP

STATE OF UTAH)
)
) : ss.
COUNTY OF Davis)

G. DOUGLAS WILCOX, having been first duly sworn, deposes and says that:

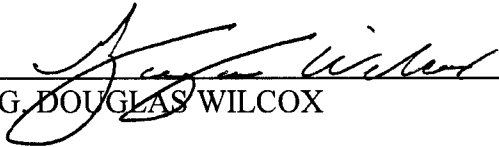
1. I am the son of Lynn J. Wilcox and Bernice C. Wilcox and am a personal representative of the estate of Bernice C. Wilcox.
2. Lynn J. Wilcox, also known as Lynn James Wilcox, died on June 13, 2007, and his death is duly recorded on the Certificate of Death, a certified copy of which is attached hereto as **EXHIBIT A**.
3. Lynn J. Wilcox and Bernice C. Wilcox were Grantees of a certain piece of real property located at 1525 South 1000 West in Clearfield, Davis County, Utah which they received as husband and wife, with full rights of survivorship, and which is more fully described as follows:

See **EXHIBIT B**, attached.

4. As of the date of his death, the above-described property was held by Lynn J. Wilcox and Bernice C. Wilcox as husband and wife.

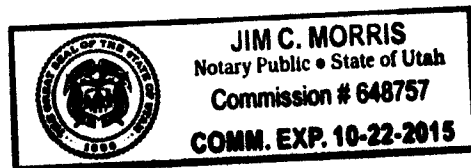
5. After receiving title to the property, the interest of Lynn J. Wilcox and Bernice C. Wilcox, was not severed, converted, or expressly declared to be an interest other than husband and wife as joint tenants with full rights of survivorship.

Date: 11/11, 2011


G. DOUGLAS WILCOX

On the 11 day of NOVEMBER, 2011, personally appeared before me G. Douglas Wilcox, the signer of the above instrument, who duly acknowledged to me that he executed the same.


NOTARY PUBLIC



STATE OF UTAH
CERTIFICATION OF VITAL RECORD

2637444
BK 5436 PG 396

CERTIFICATE OF DEATH

State File Number: 2007006207

Lynn James Wilcox

DECEDENT INFORMATION

Date of Death:	June 13, 2007	Time of Death:	10:26
City of Death:	Clearfield	County of Death:	Davis
Age:	93	Date of Birth:	December 3, 1913
Place of Birth:	Syracuse, Utah	Sex:	Male
Armed Services:	No	Marital Status:	Married
Spouse's Name:	Bernice Criddle	Usual Occupation:	Teacher/Principal
Industry/Business:	Education	Education:	Bachelor's Degree
Residence:	Clearfield, Utah	Father's Name:	William H Wilcox
Mother's Name:	Emily Barber	Facility Type:	Home
Facility or Address:	1525 South 1000 West		

INFORMANT INFORMATION

Name:	Bernice Criddle Wilcox	Relationship:	Spouse
Mailing Address:	1525 South 1000 West, Clearfield, Utah 84015		

DISPOSITION INFORMATION

Method of Disposition:	Burial	Date of Disposition:	June 23, 2007
Place of Disposition:	Syracuse City Cemetery, Syracuse, Utah		

FUNERAL HOME INFORMATION

Funeral Home:	Myers Mortuary - Roy
Address:	5865 South 1900 West, Roy, Utah 84067
Funeral Director:	Stephen K Johnston

MEDICAL CERTIFICATION

Certifying Physician:	Peter C Clemens MD, 5495 S. 500 E. Ste 100, Ogden, Utah 84405
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CAUSE OF DEATH

Natural causes due to age	
Tobacco Use:	Unknown if User
Medical Examiner Contacted:	No
Autopsy Performed:	No
Manner of Death:	Natural

Date Issued: August 14, 2007

AMENDMENT HISTORY

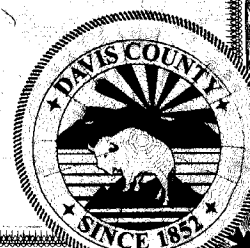
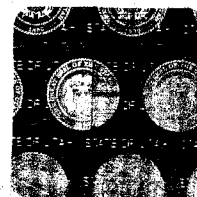
06/27/2007 Immediate Cause of Death from Natural causes to Natural causes due to age
06/27/2007 Immediate Interval from 001 to (blank)
06/27/2007 Immediate Interval Unit from Days to Years

This is an exact reproduction of the document registered in the State Office of Vital Statistics. Security features of this official document include: Intaglio Border, V & R Images in top cycloids, ultra violet fibers and hologram image of the Utah State Seal, over the words "State of Utah". This document displays the date, seal and signature of the State Registrar and the County/District Health Officer.

Barry E Nangle
Barry E. Nangle, State Registrar
Office of Vital Statistics



Lewis R. Garrett
Lewis R. Garrett
Director/Health Officer
County/District Health Department



AFFIDAVIT FOR CORRECTION

This is a legal document. Complete in black ink and do not alter.

ANY CHANGES MADE BELOW VOID THIS CERTIFICATE. A NEW CERTIFICATE MUST BE ISSUED TO VALIDATE CHANGES.

All vital records are registered as received. Corrections must be made by affidavit. An item on the birth or death certificate may be corrected by affidavit only once; a court order will be required for subsequent corrections.

There is no processing fee for affidavits registered within one year of the date of the event. After one year from the date of the event, there is a fee for filing the affidavit which includes one replacement copy. Affidavits completed **within 90 days of issuance** may be given credit for monies previously paid. (Multiple copies may require an additional fee.)

**PLEASE RETURN ALL COPIES WITH ONE COMPLETED AFFIDAVIT WITHIN 90 DAYS FOR REPLACEMENT TO:
UTAH DEPT. OF HEALTH, OFFICE OF VITAL RECORDS AND STATISTICS, P O BOX 141012,
SALT LAKE CITY, UT 84114-1012**

BIRTH CERTIFICATES

- List the facts exactly as stated on the reverse side. Opposite each item, correct the information as it should have been stated at the time of the birth.
- Who may sign the affidavit for corrections: If the person listed on the record is under 18, both parents listed on the record. If the person listed on the record is 18 he/she **must** sign as one of the witnesses, unless mentally incompetent or physically incapacitated. Parents or other older relatives are preferred witnesses for the second signature. If no father is listed on the record, an older relative of the mother of legal age may sign. The signatures **must be notarized**.
- The parent(s) may add or correct the surname from that listed on the record until the child's first birthday without proofs. The first, and/or middle name can be corrected or added without proofs until the child's sixth birthday.
- If the child is under the age of six and there is no father listed on the record, the child's surname may be corrected to match the mother's maiden name without documentation.
- Minor corrections in spelling or parents' information may be corrected anytime. Some corrections may require documentary proof.
- This affidavit cannot be used to add a father to or correct medical information on a birth certificate.

DEATH CERTIFICATES

- If corrections to non medical information are not being made by the Funeral Home, the Informant **MUST** sign as a witness along with an older relative of the decedent, or another person who is knowledgeable of the facts.
- The medical information (Cause of Death) may only be corrected by the certifying physician or the Medical Examiner.

BIRTH DEATH STILLBIRTH

LOCAL FILE NUMBER

STATE FILE NUMBER

NAME AS REPORTED ON REVERSE		1a. FIRST NAME		1b. MIDDLE NAME		1c. LAST NAME		
STATEMENT OF CORRECTIONS	2a. FACTS EXACTLY AS STATED ON THE ORIGINAL RECORD				2b. CORRECT INFORMATION			
WHY IS CHANGE NECESSARY?		3.						
PROOFS USED TO AMEND RECORD		4.						
OATH OF FIRST WITNESS (MUST BE 18 OR OLDER)	I hereby certify, under penalty of perjury, that I have personal knowledge of the above facts and that the information given is true and correct.						Subscribed & Sworn to before me this ____ day of _____ 20__	
	5. SIGNATURE OF WITNESS						Notary Public _____	
	6. DATE SIGNED 7. AGE OF WITNESS 8. DAYTIME TELEPHONE # OF WITNESS ()						My Commission expires _____	
	9. ADDRESS OF WITNESS (Street, City, State, Zip)						S E A L	
	10. RELATIONSHIP TO PERSON IN 1a: Self Parent/Guardian Spouse Funeral Director Informant Other (Specify)							
OATH OF SECOND WITNESS (MUST BE 18 OR OLDER)	I hereby certify, under penalty of perjury, that I have personal knowledge of the above facts and that the information given is true and correct.						Subscribed & Sworn to before me this ____ day of _____ 20__	
	11. SIGNATURE OF WITNESS						Notary Public _____	
	12. DATE SIGNED 13. AGE OF WITNESS 14. DAYTIME TELEPHONE # OF WITNESS ()						My Commission expires _____	
	15. ADDRESS OF WITNESS (Street, City, State, Zip)						S E A L	
	16. RELATIONSHIP TO PERSON IN 1a: Self Parent/Guardian Spouse Funeral Director Informant Other (Specify)							

REGISTRARS USE ONLY: Number of Certificates Replaced: _____ Initials: _____ Date: _____

Beginning at a point 868 feet North from the Southwest corner of the Southwest quarter of Section 11, Township 4 North, Range 2 West, Salt Lake Meridian and running thence East 159 feet; thence North 22 feet; thence East 190 feet; thence North 123 feet; thence West 349 feet; thence South 145 feet to the point of Beginning.

The following is shown for information purposes only: 12-065-0005