

When Recorded mail to:  
Melvin Martin  
182 West Stone Gate Lane  
Provo, UT 84604

ENT 11260:2025 PG 1 of 3  
ANDREA ALLEN  
UTAH COUNTY RECORDER  
2025 Feb 18 10:45 AM FEE 40.00 BY MG  
RECORDED FOR Cottonwood Title Insurance  
ELECTRONICALLY RECORDED

File No.: 186722-KMF

**AFFIDAVIT  
DEATH OF A JOINT TENANT**

I, Melvin Merrill Martin, being of legal age and being first duly sworn, depose and state as follows:

Cathie Olson Martin, the decedent in the attached certificate of death or other document witnessing death is the same person as Cathie Olson Martin, named as a party in the document dated March 14, 2023 recorded March 15, 2023 as Entry 15928:2023, records of the Utah County Recorder, Utah.

This Affidavit is given to provide notice of the termination of the decedent's interest as a joint tenant in the following described property located in Utah County, State of Utah:

Beginning at a point located South 00°29'29" East along the section line 768.08 feet and East 1318.29 feet from the West quarter corner of Section 9, Township 5 South, Range 1 East, Salt Lake Base and Meridian; thence North 82°19'59" East along the recorded monument or fenceline "called for" in Special Warranty Deed Entry No. 90642:1995 (Utah County Records), 77.00 feet to a pin set by Roger Dudley and checked by George B. Wilson; thence South 03°36'19" West along a fenceline (Boundary Line Agreement), 125.82 feet to a pin set by Roger Dudley and checked by George B. Wilson; thence South 04°11'32" West along a fenceline (Boundary Line Agreement), 50.21 feet to a pin set by Roger Dudley and checked by George B. Wilson; thence North 51°27'00" West along the Frontage Road North right of way line 88.93 feet to a pin set by Roger Dudley and checked by George B. Wilson; thence North 02°30'31" East along the recorded monument or fenceline "called for" in Special Warranty Deed Entry No. 90642:1995 (Utah County Records) 110.06 feet to a pin set by Roger Dudley and checked by George B. Wilson to a point of beginning.

TAX ID NO.: 01-090-0098

Dated February 11, 2025

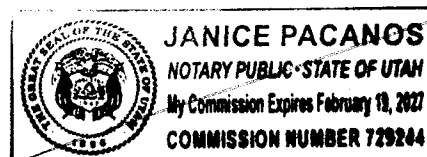
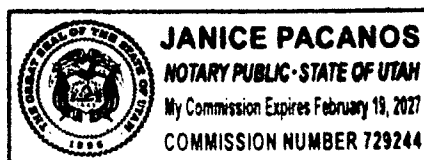
  
Melvin Merrill Martin

STATE OF UTAH

COUNTY OF UTAH

Subscribed to and sworn before me this 11 day of February, 2025 by Melvin Merrill Martin.

  
Notary Public



**STATE OF UTAH**  
**CERTIFICATION OF VITAL RECORD**

ENT 11260:2025 PG 2 of 3

**CERTIFICATE OF DEATH**

State File Number: 2023009038

**Cathie Olson Martin**  
(AKA Catrina)

**DECEDENT INFORMATION**

Date of Death:	May 30, 2023	Time of Death:	22:15
City of Death:	Provo	County of Death:	Utah
Age:	75	Date of Birth:	May 14, 1948
Place of Birth:	Salt Lake City, Utah	Sex:	Female
Armed Services:	No	Marital Status:	Married
Spouse's Name:	Melvin Merrill Martin	Usual Occupation:	Business Owner
Industry/Business:	Solar	Education:	Bachelor's Degree
Residence:	Provo, Utah	Father's Name:	Don Alvin Olson
Mother's Name:	Marjorie Moncur	Facility Type:	Home
Facility or Address:	182 Stone Gate Lane		

**INFORMANT INFORMATION**

Name:	Melvin Merrill Martin	Relationship:	Husband
Mailing Address:	182 Stone Gate Lane, Provo, Utah 84604		

**DISPOSITION INFORMATION**

Method of Disposition:	Burial
Place of Disposition:	Provo City Cemetery, Provo, Utah
Date of Disposition:	June 12, 2023

**FUNERAL HOME INFORMATION**

Funeral Home:	Premier Funeral Services
Address:	67 East 8000 South, Midvale, Utah 84047
Funeral Director:	Janna Markland

**MEDICAL CERTIFICATION**

Certifying Physician:	Nick Thomson MD, Revere Health, 1152 East 200 North, American Fork, Utah 84003
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**CAUSE OF DEATH**

Metastatic Mesothelioma Of The Lung  
Tobacco Use: Non-user  
Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural


Date Registered: June 8, 2023

Date Issued: August 11, 2023


**AMENDMENT HISTORY**

06/12/2023 Informant Address 1 from 82 Stone Gate Lane to 182 Stone Gate Lane  
06/12/2023 Non Facility Location from 82 Stone Gate Lane to 182 Stone Gate Lane

This is an exact reproduction of the facts registered in the Utah State Office of Vital Records and Statistics.  
Security features of this official document include: Intaglio Border, V & R images in top cycloids, and intaglio microtext.  
This document displays the date, seal and signature of the Utah State Registrar of Vital Record and Statistics.

  
Linda S. Wining, MSW, LCSW  
State Registrar  
Page: 07/21

  
\* 0 6 7 4 8 4 2 5 6 \*

  
Angela C. Dunn, MD, MPH  
Director/Health Officer  
County/District Health Department

  
SALT LAKE COUNTY  
HEALTH DEPARTMENT

# STATE OF UTAH - DEPARTMENT OF HEALTH - OFFICE OF VITAL RECORDS AND STATISTICS

## AFFIDAVIT TO AMEND A RECORD

Corrections to a vital record may be made by affidavit but an item on a birth record may be corrected by affidavit only once. A court order is required for gender or subsequent changes. This form is not used with a court order. A court order is necessary to make any corrections to a Delayed Birth Certificate or Death Certificate. This affidavit cannot be used to correct medical information. Many changes, including marital status, require more information; please visit our website or contact our office. Please return any copies of the certificate with this completed affidavit and all supporting documentation. If corrected certificates are reissued within 90 days of issuance, the new certificate fee will be waived but affidavit fees may still apply. This affidavit may be mailed with the correct fees, proof of ID and application for a new certificate.

**Mailing Address:** Office of Vital Records and Statistics PO Box 141012 Salt Lake City, UT 84114-1012  
**Physical Address:** Office of Vital Records and Statistics 288 North 1460 West Salt Lake City, UT 84116  
**Contact Info:** <https://VitalRecords.utah.gov> 801-538-6105 vrequest@utah.gov



**Affidavit Instructions:** Please print or type. Items 1-6: Enter the facts as reported on the current vital record. Item 7: Enter the item number from items 1-6 that will be changed, if applicable. Item 8a: Enter the information as stated on the original record. Item 8b: Enter the correct information as it should be stated. Item 9: Enter the reason the change is necessary. Item 10: Enter the proofs used to support the change. The proofs must match the asserted fact(s) exactly. Proofs must be submitted with the affidavit. Items 11-22: Enter witness information.

**Witnesses for Birth Certificate:** If the person listed on the record is under 18 years of age, both parents of record **MUST** sign the affidavit. If only one parent is listed, the second witness **MUST** be an immediate family member of the listed parent. If the person listed on the record is 18 years of age or older, he/she **MUST** sign as one of the witnesses. The second witness **MUST** be their immediate family member.

**Witnesses for Death Certificate:** The informant must sign as a witness along with an immediate member of the decedent's family. If adding a spouse, the spouse must sign as a witness. If no immediate family, a person who is knowledgeable of the facts may sign.

[ ] BIRTH [ ] DEATH [ ] STILLBIRTH

STATE FILE NUMBER: \_\_\_\_\_

INFORMATION AS REPORTED ON RECORD	1a. FIRST NAME		1b. MIDDLE NAME		1c. LAST NAME	
	2. SEX	3. DATE OF EVENT		4. PLACE OF OCCURRENCE (City and County)		
	5. NAME OF PARENT 1 (Maiden name if applicable)			6. NAME OF PARENT 2 (Maiden name if applicable)		
STATEMENT OF AMENDMENTS	7. ITEM NO.	8a. FACTS EXACTLY AS ON ORIGINAL RECORD			8b. CORRECT INFORMATION	
WHY IS CHANGE NEEDED?	9. _____					
DOCUMENTS USED	10. _____					
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 to and Sworn to before me this ____ day of ____ 20__.
	11a. SIGNATURE OF WITNESS (Must sign in front of Notary)			11b. PRINTED NAME OF WITNESS		STATE _____ COUNTY _____
	12. DATE SIGNED	13. AGE OF WITNESS	14. DAYTIME TELEPHONE		15. RELATIONSHIP TO 1a.	
	16. ADDRESS OF WITNESS					NOTARY SIGNATURE _____
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 to and Sworn to before me this ____ day of ____ 20__.
	17a. SIGNATURE OF WITNESS (Must sign in front of Notary)			17b. PRINTED NAME OF WITNESS		STATE _____ COUNTY _____
	18. DATE SIGNED	19. AGE OF WITNESS	20. DAYTIME TELEPHONE		21. RELATIONSHIP TO 1a.	
	22. ADDRESS OF WITNESS					NOTARY SIGNATURE _____

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