

AFFIDAVIT OF SURVIVING JOINT TENANT

STATE OF UTAH)
) : ss.
COUNTY OF Salt Lake)

Ellen M. Maycock ("Affiant"), being duly sworn, states and represents that:

1. Affiant is the surviving joint tenant with regard to the following described real property (the "Property") located in Salt Lake County, State of Utah:

Unit No. 5, in Building E, contained within the Colina De Roble' Condominium Home Project Amended, a condominium project as the same is identified in the Record of Survey Map recorded in Salt Lake County, as Entry No. 2306299, in book HH, at Page 1 (as said Record of Survey Map may have heretofore been amended or supplemented) and in the Declaration recorded on October 9, 1969 in Salt Lake County, as Entry No. 2306230, in Book 2796, at Page 583 (as said Declaration may have heretofore been amended or supplemented).

Together with the appurtenant undivided interest in said project's common areas as established in said Declaration and allowing for periodic alteration both in magnitude of said undivided interest and in composition of the common areas and facilities to which said interest relates.

(Parcel Number 16-11-301-024)

2. Affiant is the same person as Ellen M. Maycock named as one of the grantees/joint tenants in that certain Warranty Deed dated December 28, 2020, executed by Ellen M. Maycock as grantor, and with Ellen M. Maycock and Margaret Claire Osswald, as joint tenants, as grantees, and recorded on January 4, 2021, as Entry No. 13519903 in Book 11092, at Page 6116, of the official records of Salt Lake County, State of Utah.

3. Affiant was a joint tenant with regard to the Property with Margaret Claire Osswald (the "Decedent"), who is now deceased.

4. A certified copy of the Certificate of Death of the Decedent is attached hereto and incorporated herein by reference.

5. Affiant was personally acquainted with the Decedent. The Decedent named in the attached Certificate of Death is one and the same person as the person listed as a record owner of the Property.

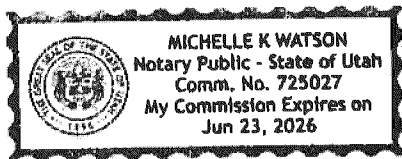
6. As surviving joint tenant, Affiant is now the sole owner of the Property.

DATED this 6 day of September, 2023.

Ellen M. Maycock

Ellen M. Maycock
Affiant

On the 6 day of September, 2023, personally appeared before me **Ellen M. Maycock**, the Affiant named in the foregoing Affidavit, who being by me first duly sworn, acknowledged to me that she executed the same and that the statements contained therein are true.



[Signature]
NOTARY PUBLIC

STATE OF ARIZONA

CERTIFICATION OF VITAL RECORD

ORIGINAL
STATE COPY

STATE OF ARIZONA
DEPARTMENT OF HEALTH SERVICES-BUREAU OF VITAL RECORDS
CERTIFICATE OF DEATH

State File Number
102-2022-021974

1. DECEDENT'S LEGAL NAME (FIRST, MIDDLE, LAST, SUFFIX) MARGARET, CLAIRE, OSSWALD		2. AKA (IF ANY)		3. DATE OF DEATH 04/04/2022	
4. SEX FEMALE		5. SOCIAL SECURITY NUMBER		6. DATE OF BIRTH 08/09/1987	
7. AGE 34 YEARS		8. CITY/TOWN, COUNTY AND ZIP OR LOCATION OF DEATH GRAND CANYON, COCONINO, 86023			
9. PLACE OF DEATH (TYPE OF PLACE OF DEATH AND FACILITY NAME/ADDRESS) OUTDOOR AREA - COLORADO RIVER MILEPOST 151.5					
10. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) SALT LAKE CITY, UTAH		11. MARITAL STATUS NEVER MARRIED		12. NAME OF SURVIVING SPOUSE PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX) NOT LISTED	
13. DECEDENT'S USUAL RESIDENCE ADDRESS (STREET, CITY, COUNTY, STATE, ZIP) 1220 KENSINGTON AVENUE, SALT LAKE CITY, SALT LAKE, UT, 84105					
14. DECEDENT'S HOSPITAL ORIGINITY NO, NOT SPANISH/HISPANIC/LATINO		15. DECEDENT'S RACE WHITE		16. EVER IN ARMED FORCES NO	
17. OCCUPATION LAWYER/ATTORNEY		18. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX) ELLEN, MITCHELL			
19. FATHER'S NAME (FIRST, MIDDLE, LAST, SUFFIX) KENNETH, BERNARD, OSSWALD		20. INFORMANT'S NAME (FIRST, MIDDLE, LAST, SUFFIX) ELLEN, MAYCOCK		21. RELATIONSHIP PARENT	
22. INFORMANT'S Mailing ADDRESS 1014 OAK HILLS WAY, SALT LAKE CITY, UT, 84108					
23. NAME AND ADDRESS OF FUNERAL FACILITY OR RESPONSIBLE PERSON REGENCY MORTUARY 9850 W THUNDERBIRD ROAD, SUN CITY, AZ, 85351		24. FUNERAL DIRECTOR'S NAME OR RESPONSIBLE PERSON JEFFREY ALAN PAYNE		25. LICENSE NUMBER FDL-01731	
26. METHOD OF DISPOSITION CREMATION		27. NAME AND LOCATION OF CRT DISPOSITION FACILITY SERENITY MORTUARY SERVICES, INC, PHOENIX, AZ, US		28. NAME AND LOCATION OF CRT UNPLACEMENT FACILITY	
29. IMMEDIATE CAUSE OF DEATH BLUNT FORCE INJURIES OF HEAD				30. APPROXIMATE INTERVAL UNKNOWN	
31. B. DUE TO OR AS A CONSEQUENCE OF:				32. APPROXIMATE INTERVAL	
33. C. DUE TO OR AS A CONSEQUENCE OF:				34. APPROXIMATE INTERVAL	
35. D. DUE TO OR AS A CONSEQUENCE OF:				36. APPROXIMATE INTERVAL	
37. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART 1 ALCOHOL USE		38. UNDRY? YES		39. HEART AT REST? YES	
40. TIME OF DEATH 20:55		41. WAS AN AUTOPSY PERFORMED? YES		42. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? YES	
43. NUMBER OF DEATH ACCIDENT		44. DATE CERTIFIED 06/03/2022			
45. NAME OF PERSON COMPLETING CAUSE OF DEATH LAWRENCE, CZARNECKI		46. CERTIFIER'S ADDRESS 4402 E HUNTINGTON DRIVE, FLAGSTAFF, AZ, 86004			

Date Registered: 04/08/2022

Date Issued: 06/08/2022

VS-49 Rev. 12/017



J3598899

This is a true certification of the facts on file with the Arizona Department of Health Services, Bureau of Vital Records, PHOENIX, ARIZONA.
Revised 07/2016

Kristal Colburn
KRYSTAL COLBURN
ASSISTANT STATE REGISTRAR



This copy not valid unless prepared on a form displaying the State Seal and impregnated with tamper-resistant ink by the issuing agency.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE