When Recorded Mail To: DOUGLAS E. NICHOLES 675 North 250 West American Fork, UT 84003 ENT 42186 BK 3181 FG 653 NINA B REID UTAH CO RECORDER BY 8T 1973 JUN 28 12:38 PH FEE 11:00 RECORDED FOR SKABELUND LAW OFFICES

WARRANTY DEED

DOUGLAS E. NICHOLES and MARY LOU D. NICHOLES, husband and wife, grantors of American Fork, Utah County, State of Utah, hereby WARRANT AND CONVEY all of their interest to DOUGLAS E. NICHOLES and MARY LOU NICHOLES, Trustees (and to their Successors in trust) of the NICHOLES FAMILY TRUST U/A/D June 73, 1993, grantee of 675 North 250 West, American Fork, Utah 84003, for the sum of \$10.00, and other valuable consideration, in the following described tract of land in Utah County, State of Utah:

The North 60 ft. of Lot 11, Block 3, also the South 10 ft of Lot 10, Block 3, also the East 40 ft. of the South 10 ft. of Lot 9, Block 3, Valley View Subdivision, American Fork, Utah, as recorded in the office of the Recorder Utah County, Utah.

The Grantees have full power to sell, mortgage, or otherwise hypothecate the property described.

WITNESS the hand of said grantors, this $\underline{23}$ day of June, A.D. one thousand nine hundred and ninety-three.

Douglas E. NICHOLES

Mary Lou D. NICHOLES

STATE OF UTAH) : ss.
COUNTY OF UTAH)

On the 23 day of June, 1993, personally appeared before me, DOUGLAS E. NICHOLES and MARY LOU D. NICHOLES, the signers of the foregoing instrument, who duly acknowledge to me that they executed the same.

Notary Public

MOTART PUBLIC STEVEN R. SKABELUND 387 West Center Orem, Utah 84057 My Commission Expires: 9-1-94 State of Utah 40 E

When Recorded Mail To: DOUGLAS D. NICHOLES 675 North 250 West American Fork, UT 84003



ENT 108238:2022 PG 1 of 3 ANDREA ALLEN UTAH COUNTY RECORDER 2022 Oct 07 2:36 pm FEE 40.00 BY CS RECORDED FOR SKABELUND LAW OFFICE

AFFIDAVIT

STATE	OF	UTAH)
			:ss
COUNTY	OF	HATU)

DOUGLAS D. NICHOLES, being first sworn upon oath, deposes and says: that he is a citizen of the U.S.A., and is over the age of twenty-one years; that he knows of his own knowledge that MARY LOU NICHOLES (aka MARY LOU DEVEY NICHOLES and MARY LOU D. NICHOLES) who appears on the copy of the death certificate attached hereto, is the same person who appears as a Trustee on Deed Entry No. 42186, Book 3181, Pages 653, on the official records of the Utah County Recorder in the following described real property:

The North 60 ft. of Lot 11, Block 3, also the South 10 ft of Lot 10, Block 3, also the East 40 ft. of the South 10 ft. of Lot 9, Block 3, Valley View Subdivision, American Fork, Utah, as recorded in the office of the Recorder Utah County, Utah.

54:004:0048

DOUGLAS D. NICHOLES, ANN NICHOLES, RICHARD F. NICHOLES and LISA WALDRON are the Successor Co-Trustees.

Dated this day of September, 2022.

DOUGLAS D. NICHOLES

STATE OF UTAH

:ss

)

COUNTY OF UTAH

Subscribed and sworn to before me, a Notary Public, this day of September, 2022, by DOUGLAS D. NICHOLES.

Witness my hand and official seal.

Patron



Notary Public



CERTHIFICATHION OF VITCAL RECORD

CERTIFICATE OF DEATH

State File Number: 2022014370

Mary Lou Devey Nicholes

ENT 108238:2022 PG 2 of 3

DECEDENT INFORMATION

Date of Death: \ August 17, 2022 Time of Death: 14:35
City of Death: Cedar Hills County of Death: Utah

Age: 92 Date of Birth: November 5, 1929

Place of Birth: American Fork, Utah Sex: Female
Armed Services: No Marital Status: Widowed
Spouse's Name: Douglas Ernest Nicholes (deceased) Usual Occupation: Homemaker

Industry/Business:
Residence:
American Fork, Utah
Mother's Name:

Mother's Name:

Own Home
American Fork, Utah
Education:
Eather's Name:
Elisha Hildabrand Devey
Nursing Home/Assisted Living

Facility or Address: The Charleston

INFORMANT INFORMATION

Name: Douglas Nicholes Relationship: Son

Mailing Address: 675 North 250 West, American Fork, Utah 84003

DISPOSITION INFORMATION

Method of Disposition: Burial

Place of Disposition: American Fork Cemetery, American Fork, Utah

Date of Disposition: August 27, 2022

FUNERAL HOME INFORMATION

Funeral Home: Anderson & Sons Mortuary

Address: 49 East 100 North, American Fork, Utah 84003

Funeral Director: Angela S Plummer

MEDICAL CERTIFICATION

Certifying Physician: Douglas R Mower MD, 226 North 1100 East, American Fork, Utah 84003

CAUSE OF DEATH

Natural Causes Not Otherwise Specified

Tobacco Use: Non-user

Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Registered: August 22, 2022 Date Issued: August 22, 2022

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. Wininger, WSW, LCSW State Registrar # 0 6 7 2 1 8 3 2 3 ±

Eric S. Edwards, MPA, MCHES
Executive Director

Utah County Health Department

Utah 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 _[]DEAT	H ؍ .[]STILLBIR	тн	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	CE (City and County)
INFOR ŘÉPC REPC	5. NAME OF PARENT 1 (Maiden name if appli	cable) 6	. NAME OF PARENT 2 (M	faiden name if applicable)
STATEMENT OF AMENDMENTS	7. ITEM NO. 8a. FACTS EXACTLY AS ON OR	IGINAL RECORD		T INFORMATION ?
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USED	I hereby certify under penalty of perjury, that	I have personal knowledge of	the above facts	Subscribed to and Sworn to before me this day of 20
	and that the information given is true and co	rrect.		
OATH OF FIRST WITNESS (MUST BE 18 OR OLDER)	/ / / / / / / / / / / / / / / / / / /	TIB. PRINTED NAME OF WITNESS		STATE COUNTY
				NOTARY SIGNATURE
	12. DATE SIGNED 13. AGE OF UITAL NATIONE T	ELEPHONE 15	5. RELATIONSHIP TO 1a.	
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	16. ADDRESS OF WITNESS	1	/	ENT 108238:2022/PG 3 of 3 E
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``	I hereby certify under penalty of perjury, that I have personal knowledge of the above facts			Subscribed to and Sworn to before me this day of 20
SECOND WITNES BE 18 OR OLDER)	and that the information given is true and co			
	17a. SIGNATURE OF WITNESS (Must sign in front of Notary)	17b. PRINTED NAME OF WITNESS		STATE COUNTY
			\'	NOTARY SIGNATURE
	18. DATE SIGNED 19. AGE OF 20. DAYTIME T WITNESS	ÉLEPHONE 21	I. RELATIONSHIP TO 1a.	
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	22. ADDRESS OF WITNESS	. •		E
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