

Mail tax notice to:
Haywood B. Thorbs, Sr.
1296 East 1300 South
Clearfield, Utah 84015

AFFIDAVIT OF TERMINATION
OF JOINT TENANCY

HAYWOOD B. THORBS, SR., spouse of CAROLYN A. THORBS, the deceased, being first duly sworn on oath, deposes and says:

1. I am the spouse of CAROLYN A. THORBS, who died on January 2, 2017, in Davis County, Utah.

2. At the death of CAROLYN A. THORBS, on January 2, 2017, HAYWOOD B. THORBS, SR. and CAROLYN A. THORBS, as joint tenants, with full rights of survivorship, and not as tenants in common, owned the following described real properties situated in Davis County, State of Utah:

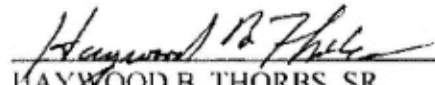
ALL OF LOT 227, VALHALLA ESTATES SUB NO 7. CONT 0.19 ACRES.

Address: 1296 East 1300 South; Serial No. 09-027-0227

having been originally conveyed by Warranty Deed on July 14, 1986, recorded in the Davis County Recorder's Office, Entry No. 0744499, Book 1100, Page 470.

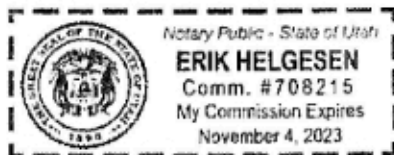
3. CAROLYN A. THORBS, as one of the named Grantees is one and the same as the CAROLYN ANN THORBS who died on January 2, 2017, in Davis County, Utah, and whose Certificate of Death, File Number 2017600181, is attached hereto and by reference made a part hereof.

4. This Affidavit is given to terminate the interest of CAROLYN A. THORBS in the joint tenancy heretofore existing in the real property situated in Davis County, Utah.


HAYWOOD B. THORBS, SR.

STATE OF UTAH)
 :SS
COUNTY OF DAVIS)

Subscribed and sworn to before me by HAYWOOD B. THORBS, SR., this 2nd day of August, 2022.




NOTARY PUBLIC

STATE OF UTAH
CERTIFICATION OF VITAL RECORD

3492727
BK 8071 PG 226

CERTIFICATE OF DEATH

State File Number: 2017000181

Carolyn Anne Thorbs

DECEDENT INFORMATION

Date of Death:	January 2, 2017	Time of Death:	15:00
City of Death:	Layton	County of Death:	Davis
Age:	67	Date of Birth:	February 6, 1949
Place of Birth:	Augusta, Arkansas	Sex:	Female
Armed Services:	No	Marital Status:	Married
Spouse's Name:	Haywood Britt Thorbs Sr	Usual Occupation:	Homemaker
Industry/Business:	Own Home	Education:	Some College but No Degree
Residence:	Clearfield, Utah	Father's Name:	Virl Gillespie
Mother's Name:	Aldora Upshaw	Facility Type:	Hospital ER
Facility or Address:	Davis Hospital and Medical Center		

INFORMANT INFORMATION

Name:	Dell Thorbs	Relationship:	Daughter
Mailing Address:	1296 E. 1300 So., Clearfield, Utah 84015		

DISPOSITION INFORMATION

Method of Disposition:	Cremation
Place of Disposition:	Lindquist's Crematory, Ogden, Utah
Date of Disposition:	January 10, 2017

FUNERAL HOME INFORMATION

Funeral Home:	Lindquist Mortuary - Layton
Address:	1867 North Fairfield Road, Layton, Utah 84041
Funeral Director:	Marshall M Gardner

MEDICAL CERTIFICATION

Certifying Physician:	Todd L Shelby MD, Intermountain Layton Clinic, 2075 University Park Blvd, Layton, Utah 84041
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CAUSE OF DEATH

Myocardial Infarction
Due to (or as a consequence of): Congestive Heart Failure [Onset: 3 Weeks]
Due to (or as a consequence of): Atrial Fibrillation [Onset: 1 Month]
Due to (or as a consequence of): Diabetes Type 2 [Onset: 10 Years]
Other significant conditions: Lupus
Tobacco Use: Unknown
Medical Examiner Contacted: Yes Autopsy Performed: No Manner of Death: Natural

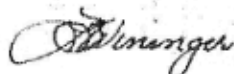
Date Registered: January 6, 2017

Date Issued: August 10, 2022

AMENDMENT HISTORY

01/06/2017 Father Last Name from Green to Gillespie
01/06/2017 Father First Name from John to Virl
01/06/2017 Father Middle Name from Roy to (blank)

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, MSW, LCSW
State Registrar



* 0 6 6 8 6 4 2 2 3 *



Brian Hatch
Director/Health Officer

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		
	12. DATE SIGNED		13. AGE OF WITNESS	14. DAYTIME TELEPHONE	15. RELATIONSHIP TO 1c.	
	16. ADDRESS OF WITNESS					
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		
	18. DATE SIGNED		19. AGE OF WITNESS	20. DAYTIME TELEPHONE	21. RELATIONSHIP TO 1c.	
	22. ADDRESS OF WITNESS					