

Mail Recorded Deed & Tax Notice To:
Dan Shelley
472 South 340 West
Spanish Fork, UT 84660

ENT 79245:2023 PG 1 of 4
ANDREA ALLEN
UTAH COUNTY RECORDER
2023 Dec 08 10:04 AM FEE 40.00 BY MG
RECORDED FOR Cottonwood Title Insurance
ELECTRONICALLY RECORDED



File No.: 173854-EDM

PERSONAL REPRESENTATIVE'S DEED

This Deed made by **Daniel Eric Shelley**, as Personal Representative of the Estate of **Dwight Eugene Shelley** (also known as **Dwight E. Shelley** and is known on the attached Death Certificate as **Dwight Eugene Shelley**),

GRANTOR, of Spanish Fork, State of Utah,

to **Daniel Eric Shelley**,

GRANTEE, of Spanish Fork, State of Utah

Whereas, Grantor is the Personal Representative of the said estate as shown in the Letters Testamentary filed in Probate Number 213400897 in the Fourth District Court, State of Utah:

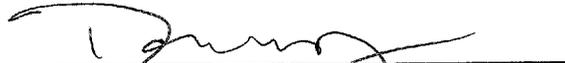
Therefore, for valuable consideration received, Grantor sells and conveys to Grantee the following described real property in **Utah** County, State of Utah:

Lot 17, PLAT "B", SPANISH TRAILS TOWNHOMES SUBDIVISION, according to the official plat thereof on file and of record in the office of the Utah County Recorder.

TAX ID NO.: 66-298-0017 (for reference purposes only)

SUBJECT TO: Property taxes for the year and thereafter; covenants, conditions, restrictions and easements of record; and all applicable zoning laws and ordinances.

Dated this 8th of December, 2023



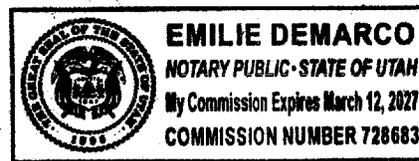
Daniel Eric Shelley,
Personal Representative of the Estate of
Dwight Eugene Shelley (also known as Dwight E.
Shelley)

STATE OF UTAH

COUNTY OF UTAH

On this 8th of December, 2023, before me, personally appeared Daniel Eric Shelley, proved on the basis of satisfactory evidence to be the person whose name is subscribed to this document, and acknowledged before me that he executed the same as Personal Representative on behalf of the Estate of Dwight Eugene Shelley (also known as Dwight E. Shelley).

Notary Public



STATE OF UTAH
CERTIFICATION OF VITAL RECORD

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CERTIFICATE OF DEATH

State File Number: 2021013883

Dwight Eugene Shelley

DECEDENT INFORMATION

Date of Death:	August 17, 2021	Time of Death:	00:22
City of Death:	Payson	County of Death:	Utah
Age:	79	Date of Birth:	December 15, 1941
Place of Birth:	Mount Pleasant, Utah	Sex:	Male
Armed Services:	Yes	Marital Status:	Widowed
Spouse's Name:	Betty Johnson (deceased)	Usual Occupation:	Sales
Industry/Business:	Retail	Education:	High School or GED
Residence:	Spanish Fork, Utah	Father's Name:	Hyrum Vernile Shelley
Mother's Name:	Vera Myrtle Stone	Facility Type:	Hospital Inpatient
Facility or Address:	Mountain View Hospital		

INFORMANT INFORMATION

Name:	Dan Shelley	Relationship:	Son
Mailing Address:	947 South Red Barn View Drive, Santaquin, Utah 84655		

DISPOSITION INFORMATION

Method of Disposition:	Burial
Place of Disposition:	Spanish Fork City Cemetery, Spanish Fork, Utah
Date of Disposition:	August 23, 2021

FUNERAL HOME INFORMATION

Funeral Home:	Nelson Family Mortuary
Address:	4780 North University Avenue, Provo, Utah 84604
Funeral Director:	Lance Nelson

MEDICAL CERTIFICATION

Certifying Physician:	Garry Miller DO, 1120 East 100 North Suite 1, Payson, Utah 84651
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CAUSE OF DEATH

Aspiration Pneumonia
Due to (or as a consequence of): Respiratory Failure With Hypoxia Due To Pneumonia
Due to (or as a consequence of): Muscular Dystrophy
Tobacco Use: Unknown if User
Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Registered: August 23, 2021

Date Issued: August 23, 2021

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. Winger
Linda S. Winger, MSW, LCSW
State Registrar
REG-1220



Eric S. Edwards
Eric S. Edwards, MPA, MCHES
Executive Director
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 [] 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					
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					

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