

Recorded at Request of: Earrel Dean and Dona L. Brian
Mail tax notice to: 363 South 800 West
Payson, UT 84651


ENT 11595:2002 PG 1 of 1
RANDALL A. COVINGTON
UTAH COUNTY RECORDER
2002 Jan 30 2:32 pm FEE 10.00 BY SS
RECORDED FOR BRIAN, DONA

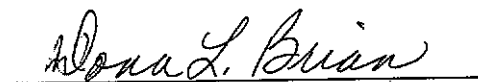
QUIT CLAIM DEED

Earrel Dean Brian and Dona L. Brian, his wife, as joint tenants with full rights of survivorship, and not as tenants in common, hereby QUIT-CLAIMS to Earrel Dean Brian and Dona Lea Brian, Trustees of the Earrel Brian Family Trust, dated December 05, 2001, Grantee, of Utah County, State of Utah, for the sum of TEN DOLLARS, and other good and valuable consideration, the following described tract of land in Utah County, State of Utah, more particularly described as follows:

Beginning at a point on a fence line, which point is north 2689.08 feet and East 1350.65 feet and South 89 Deg. 17' 53" East 128.19 feet, (based on the Utah State Coordinate System) from the West Quarter Corner of Section 31, Township 7 South, Range 3 East, Salt Lake Base and Meridian; thence South 89 Deg. 17' 53" East along a fence line 128.19 feet; thence South 1 Deg. 33' 42" West 1041.20 feet to a fence line extended; thence North 89 Deg. 13' 29" West 128.19 feet; thence North 1 Deg. 33' 41" East 1041.04 feet to a fence line and point of beginning.

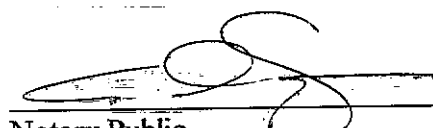
WITNESS the hand of said Grantor, this 25th day of January, 2002.

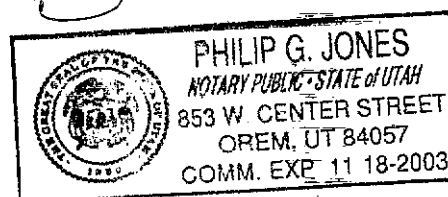

Earrel Dean Brian


Dona L. Brian

STATE OF UTAH)
) ss.
COUNTY OF UTAH)

On the 25th day of JANUARY, 2002, personally appeared before me, Earrel Dean Brian and Dona L. Brian, the signers of the foregoing instrument, who duly acknowledged to me that they executed the same.


Notary Public



Recorded at Request of: Earrel Dean and Dona L. Brian
Mail tax notice to: 363 South 800 West
Payson, UT 84651

QUIT CLAIM DEED

ENT 11596:2002 PG 1 of 1
RANDALL A. COVINGTON
UTAH COUNTY RECORDER
2002 Jan 30 2:32 pm FEE 10.00 BY SS
RECORDED FOR BRIAN, DONA

Earrel Dean Brian and Dona L. Brian, his wife, as joint tenants with full rights of survivorship, and not as tenants in common, hereby QUIT-CLAIM to Earrel Dean Brian and Dona Lea Brian, Trustees of the Earrel Brian Family Trust, dated December 05, 2001, Grantee, of Utah County, State of Utah, for the sum of TEN DOLLARS, and other good and valuable consideration, the following described tract of land in Utah County, State of Utah, more particularly described as follows:

Beginning at a point on a fence line, which point is North 2689.08 feet and East 1350.65 feet (based on the Utah State Coordinate System) from the West Quarter corner of Section 31, Township 7 South, Range 3 East, Salt Lake Base and Meridian; thence South 89° 17' 53" East along a fence line 256.38 feet; thence South 1°33' 41" West 1041.20 feet to a fence line extended; thence North 89° 13' 29" West along said fence line and fence line extended 256.38 feet; thence North 1°33' 41" East 1040.88 feet to a fence line and the point of beginning.

SUBJECT to a right of way to be used in common with others across the Southerly 30 feet and the Easterly 15 feet of the Southerly 1041.20 feet of said property.


WITNESS the hand of said Grantor, this 25th day of JANUARY, 2002.

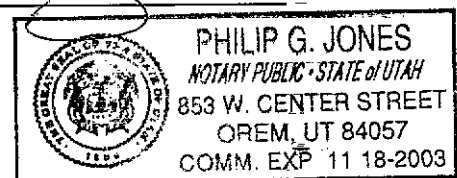

EARREL DEAN BRIAN


DONA L. BRIAN

STATE OF UTAH)
) ss.
COUNTY OF UTAH)

On the 25th day of JANUARY, 2002, personally appeared before me, Earrel Dean and Dona L. Brian, the signers of the foregoing instrument, who duly acknowledged to me that they executed the same.


Notary Public



When recorded mail to:

Lora Lea Mock
8191 So. 700 East
Sandy, Utah 84070

[Parcel ID #23-028-0042 & 23-028-0041]

AFFIDAVIT DEATH OF TRUSTEE

Lora Lea Brian Mock, being of legal age, and being first duly sworn dispose and say:

That they know of their own personal knowledge that Dona Lea Brian, the decedent mentioned in the attached Certificate of Death bearing State File No. 066243169 is the one and the same person as Dona Lea Brian, who is named as Trustee of the Earrel Brian Family Trust, dated December 05, 2001, in that certain Quit Claim Deed dated January 25th, 2002, recorded January 30, 2002 as Entry Number 11595:2002 and that certain Quit Claim Deed dated January 25, 2002, recorded January 30, 2002 as Entry Number 11596:2002.

That said Trust, and any and all amendments thereto, duly names Lora Lea Brian Mock and Maylan Dean Brian as Joint Successor Trustees upon the death of Dona Dean Brian, with the capacity to act on and in behalf of said trust.

This Affidavit of Death Certificate and the original Certificate of Death, attached, is filed in connection with that certain property located at
and further described as follows:

****See Exhibit "A" Attached Hereto and As Referenced Made A Part
Hereof*****

Page 2
Affidavit of Death of Trustee

Dated this 15th day of September, 2022.

Lora Lea Brian Mock

BY: Lora Lea Brian Mock

State of Utah)

County of Salt Lake

On the 15th day of September, A.D. 2022, personally appeared before me, Lora Lea Brian Mock, the signer of the within instrument who duly acknowledged to me that she executed the above instrument.

Ann E. Baker
Notary Public

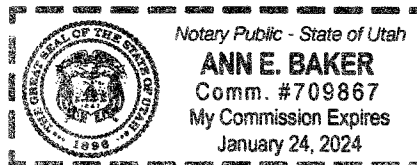


Exhibit "A"

Parcel 1:

Commencing North 2687.59 feet and East 1478.83 feet from the West Quarter corner of Section 31, Township 7 South, Range 3 East, Salt Lake Base and Meridian; thence South $89^{\circ}12'48''$ East 128.19 feet; thence South $1^{\circ}33'42''$ West 1041.09 feet; thence North $89^{\circ}13'29''$ West 128.19 feet; thence North $1^{\circ}32'42''$ East 1041.04 feet; thence North $1^{\circ}32'42''$ East .08 feet to the point of Beginning.

Parcel 2:

Commencing North 2689.08 feet and East 1350.58 feet from the West Quarter corner of Section 31, Township 7 South, Range 3 East, Salt Lake Base and Meridian; thence South $89^{\circ}17'53''$ East 128.19 feet; thence South $1^{\circ}32'42''$ West 1041.04 feet; thence North $89^{\circ}13'29''$ West 128.19 feet; thence North $1^{\circ}32'42''$ East 1041 feet to Beginning.

Said property is also known by the street address of:
No situs address, Springville, Utah 84063

STATE OF UTAH
CERTIFICATE OF VITAL RECORD

ENT 101065: 2022 PG 4 of 4

CERTIFICATE OF DEATH

State File Number: 2021004477

Dona Lea Brian

DECEDENT INFORMATION

| | | | |
|----------------------|------------------------------|-------------------|----------------------------|
| Date of Death: | March 9, 2021 | Time of Death: | 22:30 |
| City of Death: | Payson | County of Death: | Utah |
| Age: | 88 | Date of Birth: | November 28, 1932 |
| Place of Birth: | Visalia, California | Sex: | Female |
| Armed Services: | No | Marital Status: | Widowed |
| Spouse's Name: | Earrel Dean Brian (Deceased) | Usual Occupation: | Office Manager |
| Industry/Business: | Insurance | Education: | Some College but No Degree |
| Residence: | Payson, Utah | Father's Name: | Harvey Earl Little |
| Mother's Name: | Thelma Eliza Wilson | Facility Type: | Hospital ER |
| Facility or Address: | Mountain View Hospital | | |

INFORMANT INFORMATION

| | | | |
|------------------|---|---------------|----------|
| Name: | Loralea Mock | Relationship: | Daughter |
| Mailing Address: | 10163 S. Lorian Lane, Sandy, Utah 84092 | | |

DISPOSITION INFORMATION

| | |
|------------------------|------------------------------|
| Method of Disposition: | Burial |
| Place of Disposition: | Loa Town Cemetery, Loa, Utah |
| Date of Disposition: | March 20, 2021 |

FUNERAL HOME INFORMATION

| | |
|-------------------|--|
| Funeral Home: | Walker Funeral Home - Payson |
| Address: | 587 South 100 West, Payson, Utah 84651 |
| Funeral Director: | Frank Lillywhite |

MEDICAL CERTIFICATION

| | |
|-----------------------|--|
| Certifying Physician: | Joseph A Dinkins MD, Mountain View Hospital, 1000 East 100 North, Payson, Utah 84651 |
|-----------------------|--|


CAUSE OF DEATH

Heart Failure
Due to (or as a consequence of): Seizure
Due to (or as a consequence of): Dehydration
Tobacco Use: Unknown
Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Registered: March 15, 2021

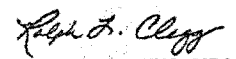
Date Issued: March 15, 2021

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: High Resolution Border, V & R images in top cycloids, and microtext.
This document displays the date, seal, and signature of the Utah State Registrar of Vital Records and Statistics.


Linda S. Wininger LCSW
State Registrar
Rev. 4/19



066243169


Ralph Clegg, EHS, MPA
Executive Director
Utah County Health
Department

Utah County
Health Department

When recorded mail to:

Lora Lea Mock
8191 So. 700 East
Sandy, Utah 84070

[Parcel ID #23-028-0042 & 23-028-0041]

AFFIDAVIT DEATH OF TRUSTEE

Lora Lea Brian Mock, being of legal age, and being first duly sworn dispose and say:

That they know of their own personal knowledge that Earrel Dean Brian, the decedent mentioned in the attached Certificate of Death bearing State File No. *01432740*/Certificate Number LL01432740 is the one and the same person as Earrel Dean Brian, who is named as Trustee of the Earrel Brian Family Trust, dated December 05, 2001 in that certain Quit Claim Deed dated January 25th, 2002, recorded January 30, 2002 as Entry Number 11595:2002 and that certain Quit Claim Deed dated January 25, 2002, recorded January 30, 2002 as Entry Number 11596:2002.

That said Trust, and any and all amendments thereto, duly names Lora Lea Brian Mock and Maylan Dean Brian as Joint Successor Trustees upon the death of Earrel Dean Brian, with the capacity to act on and in behalf of said trust.

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****See Exhibit "A" Attached Hereto and As Referenced Made A Part Hereof*****

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Affidavit of Death of Trustee

Dated this 15th day of September, 2022.

Lora Lea Brian Mock
BY: Lora Lea Brian Mock

State of Utah)

County of Salt Lake

On the 15th day of September, A.D. 2022, personally appeared before me, Lora Lea Brian Mock, the signer of the within instrument who duly acknowledged to me that she executed the above instrument.

Ann E. Baker
Notary Public

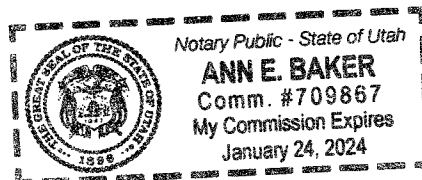


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Said property is also known by the street address of:
No situs address, Springville, Utah 84063

STATE OF UTAH - DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

Access to information on this form is limited under the Utah State Access Act and Rules

| | | | |
|--|--|--|--|
| LOCAL FILE NUMBER 25-1648 | | STATE FILE NUMBER | |
| 1. NAME OF DECEDENT Barrel Dean Brian | | 2. SEX Male | 3a. DATE OF DEATH (Mo., Day, Yr) Nov 28, 2003 |
| 3b. TIME OF DEATH (24 hr. clock) 0800 | | | |
| 4. DATE OF BIRTH (Mo., Day, Yr) Mar 17, 1929 | | 5. AGE - Last Birthday 74 | 6. BIRTHPLACE (City & State or Foreign Country) Loa, Utah |
| 7. SOCIAL SECURITY NUMBER 529-36-7699 | | | |
| 8a. PLACE OF DEATH (check only one) <input checked="" type="checkbox"/> 1. Inpatient <input type="checkbox"/> 2. ER/Outpatient <input type="checkbox"/> 3. OOA | | 8b. NAME OF HOSPITAL, NURSING HOME OR OTHER FACILITY (if outside a facility, give street address of location) Utah Valley Regional Medical Center | |
| 8c. CITY, TOWN OR LOCATION OF DEATH Provo | | 8d. COUNTY OF DEATH Utah | |
| 8e. SURVIVING SPOUSE (if wife, give maiden name) Dona Little | | | |
| 10. WAS DECEDENT EVER IN THE U.S. ARMED FORCES? <input checked="" type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No | | 11. MARITAL STATUS <input type="checkbox"/> 1. Never Married <input type="checkbox"/> 3. Widowed <input checked="" type="checkbox"/> 2. Married <input type="checkbox"/> 4. Divorced | |
| 12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do NOT enter retired) Agent | | 12b. KIND OF BUSINESS OR INDUSTRY Insurance Company | |
| 13a. RESIDENCE - STREET AND NUMBER 363 South 800 West | | 13b. CITY, TOWN, OR COMMUNITY Payson | 13c. COUNTY Utah |
| 13d. STATE Utah | | | |
| 13e. INSIDE CITY LIMITS? <input checked="" type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No | | 13f. ZIP CODE 84651 | |
| 14. WAS DECEDENT OF HISPANIC ORIGIN? (if yes, specify) <input type="checkbox"/> 1. Mexican <input type="checkbox"/> 2. Cuban <input type="checkbox"/> 3. Puerto Rican <input type="checkbox"/> 4. Other (Specify) | | 15. RACE - Black, White, Am. Indian (tribe may be entered), Japanese, etc. (Specify) White | |
| 16. EDUCATION (Specify only highest grade completed): Elementary or Secondary (9-12) College (13-16 or 17+) 16 | | | |
| 17. FATHER'S NAME (First, Middle, Last) Arthur Dudley Brian | | 18. MOTHER'S NAME (First, Middle, Last) Wilma Adell Larsen | |
| 19. NAME, RELATIONSHIP AND MAILING ADDRESS OF INFORMANT Dona Brian Wife 363 South 800 West Payson, Utah 84651 | | | |
| 20. METHOD OF DISPOSITION <input type="checkbox"/> 1. Entombment <input type="checkbox"/> 2. Donation <input type="checkbox"/> 3. Other <input checked="" type="checkbox"/> 4. Burial <input type="checkbox"/> 5. Cremation <input type="checkbox"/> 6. Removal | | | |
| 21a. DATE OF DISPOSITION Dec 1, 2003 | | 21b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) Loa Cemetery | |
| 21c. LOCATION - City or Town, State Loa, UT 84747 | | | |
| 22. SIGNATURE OF FUNERAL SERVICE LICENSEE <i>Paul E. Wheeler</i> | | 23. LICENSE NUMBER 108891-0902 | |
| 24. FUNERAL HOME (Name and address) Wheeler Mortuary | | | |
| 25. DATE DECEASED WAS LAST ATTENDED BY CERTIFYING PHYSICIAN 28 Nov 03 | | 26. If not certified by medical examiner, was death reported to M.E.? (Type and hour) <input type="checkbox"/> 1. Yes <input checked="" type="checkbox"/> 2. No | |
| 27a. CERTIFIER <input checked="" type="checkbox"/> 1. CERTIFYING PHYSICIAN: To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner as stated. <input type="checkbox"/> 2. MEDICAL EXAMINER / LAW ENFORCEMENT OFFICIAL: On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, place and due to the cause(s) and manner as stated. | | 27b. SIGNATURE AND TITLE OF CERTIFIER <i>John H. Mitchell MD</i> | |
| 27c. LICENSE NUMBER 5268437-1205 | | 27d. DATE SIGNED (Mo., Day, Yr) 1 Dec 03 | |
| 28. NAME AND ADDRESS OF PERSON WHO CERTIFIED THE CAUSE OF DEATH (ITEM 31) (Type and hour) John H. Mitchell MD 1055 N 300 W # 306 Provo UT 84604 | | | |
| 29. REGISTRAR'S SIGNATURE <i>Joseph K. Miner, MD</i> | | 30a. DATE REGISTRAR NOTIFIED OF DEATH (Mo., Day, Yr) DEC 02 2003 | |
| 30b. DATE FILED (Mo., Day, Yr) DEC 02 2003 | | | |
| 31. PART I: ENTER THE DISEASE, INJURIES, OR COMPLICATIONS THAT CAUSED THE DEATH. DO NOT ENTER THE MODE OF DYING, SUCH AS CARDIAC OR RESPIRATORY ARREST, SHOCK, OR HEART FAILURE. LIST ONLY ONE CAUSE ON EACH LINE. IMMEDIATE CAUSE (Final disease or condition resulting in death) a. Type I Aortic Dissection b. Hypertension c. d. Sequently list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE: (disease or injury that initiated events resulting in death) LAST PART II: Other Significant Conditions Contributing to Death (but not resulting in the underlying cause given in Part I) 32. IN YOUR OPINION, TOBACCO USE BY THE DECEDENT <input type="checkbox"/> 1. Probably contributed to the cause of death. <input type="checkbox"/> 2. Was the underlying cause of death. <input type="checkbox"/> 3. Did not contribute to the cause of death. <input type="checkbox"/> 4. Is unknown in relation to the cause of death. <input checked="" type="checkbox"/> 5. NON-USER <input type="checkbox"/> 6. UNKNOWN IF USER 33a. WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> 1. Yes <input checked="" type="checkbox"/> 2. No 33b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? <input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No 34. MANNER OF DEATH <input checked="" type="checkbox"/> 1. Natural <input type="checkbox"/> 2. Accident <input type="checkbox"/> 3. Suicide <input type="checkbox"/> 4. Homicide <input type="checkbox"/> 5. Undetermined <input type="checkbox"/> 6. Pending Investigation 35a. DATE OF INJURY (Mo., Day, Yr) 35b. TIME OF INJURY (24 Hour Clock) 35c. INJURY AT WORK? <input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No 35d. PLACE OF INJURY - At home, farm, street, factory, office, building, etc. (Specify) 35e. If motor vehicle accident, specify if decedent was driver, passenger or pedestrian. 35f. DESCRIBE HOW INJURY OCCURRED (other sequence of events which resulted in injury, NATURE OF INJURY should be entered in item 31). | | | |

This is to certify that this is a true copy of the certificate on file in this office. This certified copy is issued under authority of section 26-2-22 of the Utah Code Annotated, 1953 As Amended.

Date Issued: DEC 02 2003

County

Registrar

Utah

Joseph K. Miner, MD

Barry E. Nangle

Barry E. Nangle

DIRECTOR OF VITAL RECORDS

By



* 0 1 4 3 2 7 4 0 *

WARNING: IT IS ILLEGAL TO DUPLICATE THIS COPY FOR OFFICIAL PURPOSES. ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATION.

