



ENT 119167:2022 PG 1 of 4  
ANDREA ALLEN  
UTAH COUNTY RECORDER  
2022 Nov 21 11:46 am FEE 40.00 BY CS  
RECORDED FOR NIELSEN SANDRA

**AFTER RECORDING, RETURN TO:**

Gloria Nielsen  
10073 S. Homecoming Ave.  
South Jordan, Utah 84095  
Telephone: 801-571-2265

**Mail tax notices to Grantee Mailing Address:**

Sandra Nielsen  
530 S. Olive Way  
Lehi, Utah 84043

**Parcel No. 43-165-0422**

*Trustee's Deed*

**RECITALS:**

- A. Harold B. Nielsen, also known as Harold Bencke Nielsen, and Gloria Rae Nielsen, also known as Gloria Nielsen, as Grantors, established The Nielsen Trust, on June 23, 1978 (the "Trust"), with Harold B. Nielsen and Gloria Rae Nielsen, serving as the initial Trustees thereof.
- B. The real property in question was transferred to the Trust by Warranty Deed executed on August 18, 2017, and recorded in the official records of the Utah County Recorder on August 21, 2017 as Entry No. 81386; and Trust Transfer Deed executed On September 26, 2017, and recorded in the official records of the Utah County Recorder on November 1, 2017 as Entry No. 108679.
- C. Harold B. Nielsen served as Co-Trustee of the Trust until the date of his death on February 18, 2022. Harold B. Nielsen, is the same person as the decedent named in the copy of the Certificate of Death which is attached hereto as Exhibit "A" and by reference made a part hereof.
- D. Gloria Rae Nielsen is now serving as the surviving sole Trustee of the Trust pursuant to the terms and provisions of Article II of said Trust.
- E. This Trustee's Deed is executed by Gloria Rae Nielsen in her capacity as the survivor Trustee of the Trust.

**Through the authority as hereinabove recited, the undersigned, GLORIA RAE NIELSEN, Trustee of THE NIELSEN TRUST, dated June 23, 1978, Grantor, for good and valuable consideration, hereby conveys and warrants to "Sandra Nielsen," the following described property in Utah County, State of Utah:**



STATE OF UTAH  
CERTIFICATION OF VITAL RECORD

CERTIFICATE OF DEATH

State File Number: 2022003580

Harold Bencke Nielsen

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DECEDENT INFORMATION

Date of Death: February 18, 2022  
City of Death: Murray  
Age: 95  
Place of Birth: North Hollywood, California  
Armed Services: Yes  
Spouse's Name: Gloria Rae Stark  
Industry/Business: Insurance  
Residence: Draper, Utah  
Mother's Name: Anna Bencke  
Facility or Address: Intermountain Medical Center  
Time of Death: 13:21  
County of Death: Salt Lake  
Date of Birth: August 14, 1926  
Sex: Male  
Marital Status: Married  
Usual Occupation: Insurance Agent  
Education: Bachelor's Degree  
Father's Name: Harold Holger Nielsen  
Facility Type: Hospital Inpatient

INFORMANT INFORMATION

Name: Gloria Nielsen  
Mailing Address: 1922 East Course View Lane, Draper, Utah 84020  
Relationship: Wife

DISPOSITION INFORMATION

Method of Disposition: Burial  
Place of Disposition: Larkin Sunset Gardens, Sandy, Utah  
Date of Disposition: March 5, 2022

FUNERAL HOME INFORMATION

Funeral Home: Larkin Sunset Gardens  
Address: 1950 East 10600 South, Sandy, Utah 84092  
Funeral Director: Thomas A Ligman IV

MEDICAL CERTIFICATION

Certifying Physician: Nick Murray, 5121 South Cottonwood Street, Murray (Salt Lake), Utah 84107

CAUSE OF DEATH

Subdural hematoma  
Other significant conditions: Cardiac Dysrhythmia  
Tobacco Use: Non-user  
Medical Examiner Contacted: Yes Autopsy Performed: No Manner of Death: Accident

INJURY INFORMATION

Date of Injury: February 17, 2022  
Injury at Work: No  
Location of Injury: 1922 East Course View Lane, Draper, Utah  
How Injury Occurred: Ground level fall  
Motor Vehicle Accident: No  
Time of Injury: Unknown  
Place of Injury: Home

Date Registered: February 23, 2022

Date Issued: February 23, 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. Winger*

Linda S. Winger, MSW, LCSW  
State Registrar



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UTAH DEPARTMENT OF HEALTH  
Office of Vital Records & Statistics  
Salt Lake City, Utah



# 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					