

When Recorded return to:
INVEST TITLE SERVICES, INC.
374 WEST CENTER STREET
OREM UT 84057

ENT 86851:2024 PG 1 of 4
ANDREA ALLEN
UTAH COUNTY RECORDER
2024 Dec 10 02:54 PM FEE 40.00 BY AS
RECORDED FOR Inwest Title - Orem #1
ELECTRONICALLY RECORDED

File # 310289

Affidavit of Correction to AFFIDAVIT


The undersigned KRISTA TAHY, Authorized Agent of Inwest Title Services, Inc. hereby states as follows:

1. I am a resident of UTAH County, State of Utah, over the age of twenty-one years and in all respects am competent to testify to the matters contained herein.
2. I am a KRISTA TAHY Officer for Inwest Title Services, Inc. and in that capacity I am duly authorized to execute this Affidavit.
3. The AFFIDAVIT was recorded on AUGUST 7, 2024 as Entry No. 52933:2024.
4. THE AFFIDAVIT OF DEATH WAS RECORDED WITHOUT A COPY OF THE DEATH CERTIFICATE ATTACHED. THIS AFFIDAVIT IS BEING RECORDED TO ATTACH THE DEATH CERTIFICATE
5. The AFFIDAVIT is corrected to read as follows:

"See Exhibit "A" attached hereto and by this reference made a part thereof."

Dated the 10TH day of December 2024.

Inwest Title Services, Inc.


By KRISTA TAHY --- Authorized Agent

STATE OF UTAH)
 :SS
COUNTY OF UTAH)

The foregoing instrument was acknowledged before me the 10TH day of December 2024., by KRISTA TAHY, Authorized Agent of Inwest Title Services, Inc.





NOTARY PUBLIC

Exhibit "A"

Tax ID # 49-062-0008

LOT 18, BLOCK 4, PLAT "B", PROVO HEIGHTS SUBDIVISION, AND THE EAST 10 FEET OF LOT 17, BLOCK 4, PLAT "B", PROVO HEIGHTS SUBDIVISION, PROVO, UTAH, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE AND OF RECORD IN THE OFFICE OF THE UTAH COUNTY RECORDER, STATE OF UTAH.

STATE OF UTAH
CERTIFICATION OF VITAL RECORD

ENT 86851:2024 PG 3 of 4

CERTIFICATE OF DEATH

State File Number: 2022007776

Larry Lee Kitchen

DECEDENT INFORMATION

Date of Death:	April 28, 2022	Time of Death:	02:14
City of Death:	Provo	County of Death:	Utah
Age:	96	Date of Birth:	September 15, 1925
Place of Birth:	Lovell, Wyoming	Sex:	Male
Armed Services:	Yes	Marital Status:	Widowed
Spouse's Name:	Janet Baxter (deceased)	Usual Occupation:	Jack of All Trades
Industry/Business:	Defense Contractor	Education:	Some College but No Degree
Residence:	Provo, Utah	Father's Name:	Thomas Lee Kitchen
Mother's Name:	Myrtle Asay	Facility Type:	Hospital Inpatient
Facility or Address:	Utah Valley Hospital		

INFORMANT INFORMATION

Name:	Larry Alan Kitchen	Relationship:	Son
Mailing Address:	2750 Fargo Way, Sparks, Nevada 89434		

DISPOSITION INFORMATION

Method of Disposition: Burial
Place of Disposition: Orem City Cemetery, Orem, Utah
Date of Disposition: May 9, 2022

FUNERAL HOME INFORMATION

Funeral Home: Walker Sanderson Funeral Home-Orem
Address: 646 East 800 North, Orem, Utah 84097
Funeral Director: Eddie D Olpin

MEDICAL CERTIFICATION

Certifying Physician: Justin N Jones MD, Utah Valley Hospital, 395 West Cougar Blvd Ste 602, Provo, UT 84604

CAUSE OF DEATH

Respiratory Arrest
Due to (or as a consequence of): Multiorgan Failure
Due to (or as a consequence of): Severe Sepsis With Lactic Acidosis
Due to (or as a consequence of): Cholangitis Due To Bile Duct Obstruction
Other significant conditions: Stage 4 Chronic Kidney Disease
Tobacco Use: Non-user
Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Registered: May 3, 2022

Date Issued: May 3, 2022

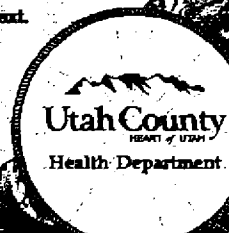
This is an exact reproduction of the facts registered in the Utah State Office of Vital Records and Statistics.
Security features of this official document include: Intaglio Border, V & R images in top cycloids, and intaglio microtext.
This document displays the date, seal and signature of the Utah State Registrar of Vital Record and Statistics.



Linda S. Winiger
Linda S. Winiger, MSW, LCSW
State Registrar



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.		NOTARY SIGNATURE _____
	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.		NOTARY SIGNATURE _____
	22. ADDRESS OF WITNESS					