WHEN RECORDED MAIL TO: **GRANTEE** 4020 SOUTH 700 WEST SALT LAKE CITY, UT 84123 11113

11160262 4/1/2011 1:32:00 PM \$12.00 Book - 9915 Pg - 5715-5716 Gary W. Ott Recorder, Salt Lake County, UT TITAN TITLE INS AGCY INC BY: eCASH, DEPUTY - EF 2 P.

WARRANTY DEED

Edward Paul Loveland and Jane Evalyn Loveland, Trustees of the Edward and Jane Loveland Family Trust, dated March.7, 2006

Grantor,

of SALT LAKE CITY, County of SALT LAKE, State of UTAH hereby CONVEYS and WARRANTS to

ELLA JEAN LOVELAND, A SINGLE WOMAN

Grantee.

of SALT LAKE CITY, County of SALT LAKE, State of UT, for the sum of TEN DOLLARS and other good and valuable consideration, the following tract of land in SALT LAKE County, State of UT, to-wit:

See Attached Exhibit "A"

LESS AND EXCEPTING any and all water rights associated herewith.

Subject to easements, restrictions and rights of way appearing of record and enforceable in law and subject to 2011 taxes and thereafter.

WITNESS the hand of said grantor, this March 31, 2011

the Edward and Jane Loveland Family Trust, dated March.7, 2006

BY Clears Paul Fordant
EDWARD PAUL LOVELAND, Trustee

BY: Jane Evalyn Loveland, Trustee

JANE EVALYN LOVELAND, Trustee

STATE OF UTAH

) :85

COUNTY OF SALT LAKE

On the 31st day of March, 2011, personally appeared before me Edward Paul Loveland and Jane Evalyn Loveland, who being duly sworn did say that he/she is the Trustee of the Edward and Jane Loveland Family Trust, dated March.7, 2006 and that said instrument was signed in behalf of said Trust by authority and said Edward Paul Loveland and Jane Evalyn Loveland, acknowledged to me that he/she, as such Trustee, executed the same in the name of the Trust.

RYAN HOSKINS NOTARY PUBLIC+STATE OF UTAH COMMISSION# 577691 COMM. EXP. 02-19-2013

Notary Public Residing at:

My Commission Expires:

EXHIBIT "A"

File Number: 11113

Beginning at the Southeast corner of Tax Parcel No. 15-35-400-049 which point is 803.55 feet North and West 211.2 feet and South 230.29 feet from the Southeast corner of Section 35, Township 1 South, Range 1 West, Salt Lake Meridian; thence North 88°30' West 323.15 feet; thence North 96.00 feet; thence South 88°19'22" East 323.178 feet to 700 West Street; thence South along 700 West Street 95.00 feet to the point of beginning.

When recorded mail to (Tax Mailing Address):
Grantee
4016 South 700 West
Murray, UT 84123
MTC File No. 205946

14058550 B: 11394 P: 1286 Total Pages: 2 01/03/2023 12:18 PM By: CSelman Fees: \$40.00 Rashelle Hobbs, Recorder, Salt Lake County, Utah Return To: MERIDIAN TITLE COMPANY

64 E WINCHESTER STSALT LAKE CITY, UT 841075600

WARRANTY DEED

Burt D. Loveland, Successor Trustees of the Edward and Jane Loveland Family Trust, dated March 7, 2006, GRANTOR(S), for good and valuable consideration, hereby CONVEY(S) and WARRANT(S) to

Burt D. Loveland and Ella J. Loveland, as joint tenants

as GRANTEE(S), the following real property located in Salt Lake County, State of Utah, described as:

Beginning 803.55 feet North and West 211.2 feet from the Southeast Corner of Section 35, Township 1 South, Range 1 West, Salt Lake Meridian; thence North 87°30' West 323.40 feet; thence South 235.93 feet; thence South 88°30' East 323.15 feet; thence North 230.29 feet, more or less to the point of beginning.

Less and excepting:

Beginning at the Southeast corner of Tax Parcel No. 15-35-400-049 which point is 803.55 feet North and West 211.2 feet and South 230.29 feet from the Southeast corner of Section 35, Township 1 South, Range 1 West, Salt Lake Meridian; thence North 88°30' West 323.15 feet; thence North 96.00 feet; thence South 88°19'22" East 323.178 feet to 700 West Street; thence South along 700 West Street 95.00 feet to the point of beginning.

Tax Parcel No. 15-35-400-122

Subject to general property taxes for the current year and thereafter. Subject to easements, conditions, covenants, restrictions and reservations of record.

[Signatures on following page]

ACCOMMODATION RECORDING ONLY

Meridian Title Company makes no representation as to condition of title, priority of llen, nor does it assume any responsibility for validity, sufficiency or effect of document.

In witness whereof, the grantors have executed this instrument this 3 day of January, 2023.

The Edward and Jane Loveland Family Trust dated March 7, 2006

Burt D. Loveland Successor Trustees

STATE OF UTAH) :ss COUNTY OF SALT LAKE)

The foregoing instrument was acknowledged before me this <u>3rd</u> day of January, 2023, by Burt D. Loveland, Successor Trustees of the Edward and Jane Loveland Family Trust, dated March 7, 2006, who signed the instrument with authority.

NOTARY PUBLIC

JOSEPH GRIFFITHS

NOTARY PUBLIC • STATE OF UTAH

My Commission Expires June 25, 2025

COMMISSION NUMBER 719002

Mail Tax Notice To: Ella Loveland 728 E. Roosevelt Ave. Salt Lake City, UT 84105 14149982 B: 11443 P: 3585 Total Pages: 6
09/07/2023 01:24 PM By: BGORDON Fees: \$40.00
Rashelle Hobbs, Recorder, Salt Lake County, Utah
Return To: KB&A
50 W BROADWAY STE 1000SALT LAKE CITY, UT 841012005

AFFIDAVIT OF SURVIVORSHIP

STATE OF UTAH

: ss.

County of Salt Lake

.

I, ELLA J. LOVELAND, being of legal age and being first duly sworn upon oath, depose and state as follows:

- 1. I was personally acquainted with BURT DALE LOVELAND.
- 2. BURT DALE LOVELAND died in Salt Lake County, Utah, on July 31, 2023. A copy of his certificate of death is attached to this affidavit. The decedent in the attached certificate of death is the same person as BURT D. LOVELAND named as a party in the document recorded January 03, 2023, as entry 14058550 in book 11394, pages 1286-1287 in the records of the Salt Lake County Recorder.
- 3. The purpose of this affidavit is to terminate the decedent's interest in the following described property with ELLA J. LOVELAND, located in Salt Lake County, State of Utah, and more particularly described as follows:

BEGINNING 803.55 FEET NORTH AND WEST 211.2 FEET FROM THE SOUTHEAST CORNER OF SECTION 35, TOWNSHIP 1 SOUTH, RANGE 1 WEST, SALT LAKE MERIDIAN; THENCE NORTH 87°30' WEST 323.40 FEET; THENCE SOUTH 235.93 FEET; THENCE SOUTH 88°30' EAST 323.15 FEET; THENCE NORTH 230.29 FEET, MORE OR LESS TO THE POINT OF BEGINNING.

LESS AND EXCEPTING:

BEGINNING AT THE SOUTHEAST CORNER OF TAX PARCEL NO. 15-35-400-049 WHICH POINT IS 803.55 FEET NORTH AND WEST 211.2 FEET AND SOUTH 230.29 FEET FROM THE SOUTHEAST CORNER OF SECTION 35, TOWNSHIP 1 SOUTH, RANGE 1 WEST, SALT LAKE MERIDIAN; THENCE NORTH 88°30' WEST 323.15 FEET; THENCE NORTH 96.00 FEET; THENCE SOUTH 88°19'22" EAST 323.178 FEET TO 700 WEST STREET; THENCE SOUTH ALONG 700 WEST STREET 95.00 FEET TO THE POINT OF BEGINNING.

Parcel No. 15-35-400-122

DATED this 6 day of September, 2023.

Subscribed and sworn before me on this 6 day of 5EPTEMBER, 2023 by the affiant, ELLA J. LOVELAND.

NOTARY PUBLIC

Veronica Schmitz
Notary Public, State of Utah
Commission # 728975
My Commission Expires on 01/24/2027

CERTIFICATE OF DEATH

State File Number: 2023012575

Burt Dale Loveland

DECEDENT INFORMATION

Date of Death: City of Death:

Age:

July 31, 2023 **Taylorsville**

55

Salt Lake City, Utah Sex:

Place of Birth: Armed Services:

Spouse's Name: Kimberly Mary Brohamer

Industry/Business: Dairy

Residence: Mother's Name: Facility or Address:

Taylorsville, Utah Jane Evalyn Murphy

5859 South Hazelhurst Drive

Time of Death:

19:45 County of Death: Salt Lake

Date of Birth: November 16, 1967

Male

Married Marital Status: Usual Occupation: Sales Rep

Education: High School or GED Father's Name: Edward Paul Loveland

Facility Type: Home

INFORMANT INFORMATION

Name: Mailing Address: Paul Loveland

2277 West Jordan Meadows Cove, West Jordan, Utah 84084

Relationship:

DISPOSITION INFORMATION

Method of Disposition: Burial

Place of Disposition:

Mountain View Memorial Estates, Salt Lake City, Utah

Date of Disposition: August 5, 2023

FUNERAL HOME INFORMATION

Funeral Home:

Mountain View Memorial Mortuary

Address:

7800 South 3115 East, Salt Lake City, Utah 84121

Funeral Director:

Francis L Mortensen

MEDICAL CERTIFICATION

Certifying Physician:

Michael Belenky MD, Office of the Medical Examiner, 4451 South 2700 West, Taylorsville, Utah

CAUSE OF DEATH

Gunshot wound of the head Tobacco Use: Unknown if User

Medical Examiner Contacted: Yes Autopsy Performed: No Manner of Death: Suicide

INJURY INFORMATION

Date of Injury: Injury at Work:

July 31, 2023 No

Time of Injury: Place of Injury: 19:45 Home.

Location of Injury:

5859 South Hazelhurst Drive, Taylorsville, Utah

How Injury Occurred:

Shot himself with a 9mm handgun. Motor Vehicle Accident: No

Date Registered: August 3, 2023 Date Issued: August 30, 2023

Page 1 of 2 - Amendment History on Page 2

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



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 Peath Certificate: The informant must sign as a witness along with an immediate member of the decedent's family. If adding a

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.

| 10. FIRST NAME 10. MIDDLE NAME 11. FIRST NAME 12. SEX 13. DATE OF EVENT 14. PLACE OF OCCURRENCE (City and County) 15. NAME OF PARENT 1 (Maiden name if applicable) 16. NAME OF PARENT 2 (Maiden name if applicable) 17. ITEM NO. (8a. FACTS EXACTLY AS ON ORIGINAL RECORD 18b. CORRECT INFORMATION 19c. 10. MIDDLE NAME 10. NAME OF PARENT 2 (Maiden name if applicable) 11. NAME OF PARENT 2 (Maiden name if applicable) 12. SELATION SIND 10 IN TARY SIGNATURE 13. SELATION SIND 10 IN TARY SIGNATURE 14. PLACE OF PARENT 2 (Maiden name if applicable 2 (Maiden name if appli | • | []BIRTH []D | EATH []STILLE | BIRTH | STATE FILE NUMBER: | | | |
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| WHY IS CHANGE NEEDED? DOCUMENTS USED 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. 11a. SIGNATURE OF WITNESS (Must sign in front of Notary) 11b. PRINTED NAME OF WITNESS 12. DATE SIGNED 13. ADDRESS OF WITNESS 14. ADDRESS OF WITNESS 15. ADDRESS OF WITNESS 16. ADDRESS OF WITNESS 17a. SIGNATURE OF WITNESS (Must sign in front of Notary) 17b. PRINTED NAME OF WITNESS SUbscribed to and Sworn to before me this day of 20 and that the information given is true and correct. 15a. ADDRESS OF WITNESS 15b. ADDRESS OF WITNESS 16b. ADDRESS OF WITNESS 17a. SIGNATURE OF WITNESS (Must sign in front of Notary) 17b. PRINTED NAME OF WITNESS STATE COUNTY NOTARY SIGNATURE SUBscribed to and Sworn to before me this day of 20 and that the information given is true and correct. 17a. SIGNATURE OF WITNESS (Must sign in front of Notary) 17b. PRINTED NAME OF WITNESS STATE COUNTY NOTARY SIGNATURE 22. ADDRESS OF WITNESS STATE COUNTY NOTARY SIGNATURE STATE COUNTY NOTARY SIGNATURE 22. ADDRESS OF WITNESS STATE COUNTY NOTARY SIGNATURE STATE COUNTY NOTARY SIGNATURE STATE COUNTY NOTARY SIGNATURE STATE COUNTY NOTARY SIGNATURE | | 7. ITEM NO. 8a. FACTS EXACTLY AS O | ORIGINAL RECORD | 8b. CORR | PRECT INFORMATION | | | |
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14149982 B: 11443 P: 3588 Page 4 of 6

CERTIFICATION OF VITAL RECORD

Burt Dale Loveland

AMENDMENT HISTORY

08/03/2023 Found on this Date from **X** to **(blank)** 08/03/2023 Found at this Time from **X** to **(blank)** 08/04/2023 Decedent Time of Death from **19:53** to **19:45**

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.

Dininger

Linda S. Wininger, MSW, LCSW State Registrar



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 NUMB | ER: | | | SISSIONIOST- |
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| MATIC | 2. SEX 3. DATE OF EVENT 4. PLACE OF OCCURREN | | | | | | NCE (City and County) | | | | |
| INFORMATION AS REPORTED ON RECORD | 5. NAME OF PARENT 1 (Maiden name if applicable) 6. NAME OF PARENT 2 (M | | | | | Maiden name if applicable) | A | | | | |
| | 7. ITEM NO. 8a. FACTS EXACTLY AS ON ORIGINAL RECORD 8b. CORREC | | | | | | CT INFORMATION | | | | |
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| STATEMENT OF AMENDMENTS | | | | | | | | | 1 | | |
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| USLD | I hereby certi | fy under penalty o | f perjury, that I | have personal kno | wledge of the abov | e facts | Subscribed to and Sworn | to before me this _ | day of | 20 | |
| · · · | and that the information given is true and correct. 11a. SIGNATURE OF WITNESS (Must sign in front of Notary) (11b. PRINTED NAME OF WITNESS) | | | | | | COLINTY | | | | |
| OATH OF FIRST WITNESS (MUST BE 18 OR OLDER) | 11a. SIGNATURE | OF WITNESS (Must sign | in front of Notary) | IID. PRINTED NAME OF | WIINESS | | STATE | _ COUNTY | | | - |
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| ST V OR O | 12. DATE SIGNE | 13. AGE OF WITNESS | 14. DAYTIME TE | EPHONE | 15. RELATION | SHIP TO 1a. | | | | | |
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| 유립 | 16. ADDRESS OF | WITNESS | | | 4 | | - | | | | E |
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| QATH 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 | | | | | |
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