MAIL TAX NOTICES TO GRANTEE(S) AT: 2899 EAST CANYON CREST DRIVE SPANISH FORK, UT 84660



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ENT 50767: 2017 PG 1 of 2

Jeffery Smith

Utah County Recorder

2017 May 26 02:11 PM FEE 12.00 BY CS

RECORDED FOR GT Title Services - Spanish FG

ELECTRONICALLY RECORDED

Tax ID No.: 48-283-0109

WARRANTY DEED

CARTER JAMES YOUNG AND THERESA ELLEN YOUNG of **UTAH** County, State of **UT** (hereafter referred to as "*Grantor*"), in exchange for good and valuable consideration, hereby convey(s) and warrant(s) to

NEIL PFUNDER AND ROXANNE PFUNDER, HUSBAND AND WIFE AS JOINT TENANTS

of UTAH County, State of Utah (hereafter "Granted"),

that certain real property located in **UTAH** County, Utah commonly known as **2899 EAST CANYON CREST DRIVE, SPANISH FORK, UT 84660**, and further described as follows:

LOT 109, OF OAKVIEW ESTATES PLAT "F", ACCORDING TO THE OFFICIAL PLAT THEREOF, ON FILE AND OF RECORD IN THE OFFICE OF THE UTAH COUNTY RECORDERS OFFICE, STATE OF UTAH.

Subject to easements, restrictions and rights of way appearing of record and enforceable in law and subject to general property taxes for the current year and thereafter.

Witness the hand of Grantor this 25 day of MAY	, 2017.
auta Omoso Arm	Mulaullenyng THERESA ELLEN YOUNG
CARTER JAMES YOUNG	THERESA ELLEN YOUNG ()
STATE OF UTAH)) ss.	
COUNTY OF UTAH	
On this 25 day of May, 2017, personally appeared before me CARTER JAMES YOUNG and THERESA ELLEN YOUNG , the named Grantor(s) of the within instrument, proved on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to this instrument, and duly acknowledged that he/she/they executed this instrument. Witness my hand and official seal.	
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BRETT G. HERBERT Notary Public - State of Utah Commission #680647 My Commission Expires January 10, 2019	

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Recording Requested by:



ENT 17753 = 2024 PG 1 of 4
ANDREA ALLEN
UTAH COUNTY RECORDER
2024 Mar 20 03:03 PM FEE 40.00 BY AC
RECORDED FOR FIRST AMERICAN TITLE INSUR

MAIL TAX NOTICES TO AND AFTER RECORDING RETURN TO: Roxanne Pfunder 2899 East Canyon Crest Drive Spanish Fork, Utah 84660

SPACE ABOVE THIS LINE (3 1/2" X 5") FOR RECORDER'S USE

AFFIDAVIT DEATH OF A JOINT TENANT

Escrow No. **880-6303698** (BM)

A.P.N.: 48-283-0109

I, Roxanne Pfunder being first duly sworn on oath depose and say:

That I am a citizen of the United States of America, over the age of 21 years and a resident of **Spanish Fork**, County of **Utah**, State of **UT**:

That I was well and personally acquainted with **Neil Pfunder**, one of the grantees in that certain Warranty Deed recorded **May 26, 2017** as Entry No. **50767**; **2017** in Book **na**, at Page **na**, records of the Recorder of **UTAH** County, Utah.

That I know of my own knowledge that **Neil Pfunder** in the said deed and **Neil Aaron Pfunder** mentioned in the attached copy of Certificate of Death was one and the same person.

This affidavit is executed in connection with the termination of the joint tenancy of **Neil Pfunder** and **Roxanne Pfunder**, with respect to the following described property, situated in **UTAH** County, State of Utah:

LOT 109, OF OAKVIEW ESTATES PLAT "F", ACCORDING TO THE OFFICIAL PLAT THEREOF, ON FILE AND OF RECORD IN THE OFFICE OF THE UTAH COUNTY RECORDERS OFFICE, STATE OF UTAH.

Dated: <u>March</u>, 5Th, **2024**

Roxanne Pfunder

STATE OF - (Hah

County of Utah)ss.

On <u>musch 5, 2024</u>, before me, the undersigned Notary Public, personally appeared, **Roxanne Pfunder** personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

Notary Public

WITNESS my hand and official seal.

My Commission Expires:

SKYLER TERRY
Notary Public - State of Utah
Comm. No. 732303
My Commission Expires on
Jul 26, 2027



CERTIFICATION OF VITAL RECORD

CERTIFICATE OF DEATH

State File Number: 2024000314

Neil Aaron Pfunder

ENT 17753 2024 PG 3 of 4

DECEDENT INFORMATION

Date of Death: January 5, 2024
City of Death: Spanish Fork

Age: 70

Place of Birth: Phoenix, Arizona

Armed Services: No Spouse's Name Roxanne Lewis Industry/Business: Firefighting

Residence: Spanish Fork, Utah
Mother's Name: Frances Lucille Church...

Facility or Address: 2899 E Canyon Crest Dr

Time of Death: 15:20 County of Death: Utah

Date of Birth:

Sex: Male Marital Status: Married

Marital Status: Usual Occupation:

Education: Father's Name:

Relationship:

Facility Type: " I

Utah December 22, 1953

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Firefighter Paramedic High School or GED John Elmer Pfunder

Home

INFORMANT INFORMATION

Mailing Address:

Name: Roxanne Pfunder

2899 E Canyon Crest Dr, Spanish Fork, Utah 84660

DISPOSITION INFORMATION

Method of Disposition: Removal

Place of Disposition: Rose Hill Cemetery, Idaho Falls, Idaho

Date of Disposition: January 13, 2024

FUNERAL HOME INFORMATION

Funeral Home: Utah Valley Mortuary

Address: 1966 West 700 North, Lindon, Utah 84042

Runeral Director: Austin T Palmer

MEDICAL CERTIFICATION

Certifying Physician: Garry Miller DO, 1120 East 100 North Suite1, Payson, Utah 84651

CAUSE OF DEATH

Astrocytoma Of The Brain

Due to (or as a consequence of): Bacteremia Due to (or as a consequence of): Brain Mass

Tobacco Use: Non-user

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

Date Registered: January 8, 2024 Date Issued: January 9, 2024

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 * 9 6 7 7 3 9 4 5 1 *

Eric S. Edwards, MPA, MCHES
Executive Director

Utah County Health Department

Utah County
Health Department



DHHS - OVRS - 901 Rev. 06/2023

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. 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 Contact Info: https://VitalRecords.utah.gov 801-538-6105 vrequest@utah.gov

online instructions

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.

A PLACE OF OCCURRENCE (City and County) 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) 7. ITEM NO. 8a. FACT'S EXACTLY AS ON ORIGINAL RECORD 8b. CORRECT INFORMATION
7. ITEM NO. 8a. FACT'S EXACTLY AS ON ORIGINAL RECORD 8b. CORRECT INFORMATION
7. ITEM NO. 8a. FACT'S EXACTLY AS ON ORIGINAL RECORD 8b. CORRECT INFORMATION
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WHY IS 9
CHÁNGE
NEEDED?
DOCUMENT 10 /
USED
I hereby certify under penalty of perjury, that I have personal knowledge of the above facts Subscribed to and Sworn to before me this day of 20
and that the information given is true and correct. Signature of witness (Must sign In front of Notary) 11b. PRINTED NAME OF WITNESS STATE COUNTY
NOTARY SIGNATURE
13. AGE OF 14. DAYTIME TELEPHONE 15. RELATIONSHIP TO 1a ENT 17753 = 2024 PG 4 of 4
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王 坛 16. ADDRESS OF WITNESS
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I hereby certify under penalty of perjury, that I have personal knowledge of the above facts Subscribed to and Sworn to before me thisday of20
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
NOTARY SIGNATURE
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NOTARY SIGNATURE NOTARY SIGNATURE 18. DATE SIGNED 19 AGE OF 20. DAYTIME TELEPHONE 21. RELATIONSHIP TO 1a.
I hereby certify under penalty of perjuly, that I have personal knowledge of the above facts and that the information given is true and correct. 17a SIGNATURE OF WITNESS (Must sign in front of Notary) 17b PRINTED NAME OF WITNESS