

AFFIDAVIT OF SURVIVORSHIP

State of Wyoming)
)ss
County of Sheridan)

Linda A. Estes, being first duly sworn upon oath does depose and state as follows:

1. That she is the surviving spouse of **Douglas C. Estes**, who died November 24, 2020, in Sheridan County, State of Wyoming.

2. That at the time of his death the said Douglas C. Estes, along with your affiant Linda A. Estes, husband and wife, were the owners of the following described property situate in Sheridan County, Wyoming, to-wit:

Lot 11 of the Falcon Ridge Development, a subdivision in Sheridan County, Wyoming, as recorded December 12, 1994, in Drawer F, Plat #13.

3. That the said Douglas C. Estes, along with your affiant Linda A. Estes, husband and wife, as tenants by the entirety, received title to the above-described real property by that certain Warranty Deed from Joe A. Naramore, said deed being recorded February 21, 2006, in Book 471 of Deeds, at Page 654 thereof, in the Office of the County Clerk in and for Sheridan County, State of Wyoming.

4. That at the time of his death the said Douglas C. Estes, along with your affiant Linda A. Estes, husband and wife, were also the owners of the following described property situate in Sheridan County, Wyoming, to-wit:

Lot 34, Block B, Powder Horn Ranch, Planned Unit Development, Phase One. A subdivision in Sheridan County, Wyoming, filed as Plat #P-36.

5. That the said Douglas C. Estes, along with your affiant Linda A. Estes, husband and wife, as tenants by the entirety, received title to the above-described real property by that certain Warranty Deed from Phyllis Jeanne Rotellini, Trustee of the Phyllis Jeanne Rotellini Trust under agreement dated September 9, 1999, said deed being recorded October 24, 2000, in Book 418 of Deeds, at Page 602 thereof, in the Office of the County Clerk in and for Sheridan County, State of Wyoming.

6. That by reason of the death of the said Douglas C. Estes, and the fact that the above-described properties were held by Douglas C. Estes and Linda A. Estes, husband and wife, as

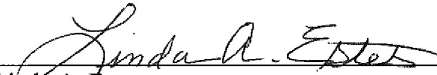
tenants by the entirety, all right, title and interest in and to the properties above-described is now vested solely in Linda A. Estes.

7. That attached hereto is a certified copy of the Certificate of Death of the said **Douglas C. Estes**, duly certified to by Guy Beaudoin, Deputy State Registrar, Department of Health, State of Wyoming.

8. That this Affidavit is made pursuant to Wyoming Statute §2-9-102 and given for the express purpose of terminating the tenancy by the entirety in the name of Douglas C. Estes, and vesting sole title in the real property above-described in the name of **Linda A. Estes**, as the surviving tenant by the entirety.

Further this affiant sayeth not.

Dated this 21st day of JANUARY, 2021.

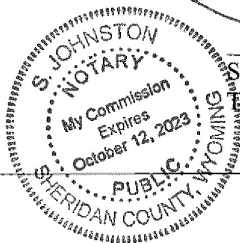

Linda A. Estes


State of Wyoming)
)ss
County of Sheridan)

The foregoing instrument was signed and sworn to before me by Linda A. Estes, this 21st day of JANUARY, 2021.

Witness my hand and official seal.

My Commission Expires: _____




Signature of Notarial Officer
Title: Notary Public

STATE OF WYOMING

CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

Decedent:
Name: Douglas C Estes
Sex: Male
Date of Birth: October 24, 1943
Date and Place of Death:
Date of Death: November 24, 2020
City of Death: Sheridan
Location: Memorial Hospital of Sheridan County 1401 West 5th Street
Additional Decedent Information:
Place of Birth: Bremerton, Washington
Residence: Sheridan, Wyoming
Marital Status: Married - Linda Naramore
Armed Forces: No
Name of Father: Gilbert Estes
Name of Mother: Florence Bull
Informant: Linda Estes
Disposition:
Method of Disposition: Cremation
Place of Disposition: Wyo Cremation Authority, Sheridan, Wyoming
Funeral Home or Facility:
Facility: Kane Funeral Home, Sheridan, Wyoming
Cause of Death:
The immediate cause is listed on the first line followed by any underlying causes.
(a) Acute Hypoxic Respiratory Failure
(b) Pneumonia
(c) COVID-19
Other Significant Conditions: Diabetes Mellitus Type II, Hypertension, Hyperlipidemia
Manner of Death: Natural Death
Certifier:
Type: Physician
Name: Elise Sylar, M.D.
Address: 1401 West 5th Street, Sheridan, WY, 82801
Date Filed: December 03, 2020

State File Number: 2020-004753

Social Security Number: 520-42-6536
Age at the Time of Death: 77 years

County of Death: Sheridan

Relationship: Wife

Interval:
Minutes

Time of Death: 17:03 (Actual)



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FEES: \$18.00 DO AFFIDAVIT OF SURVIVORSHIP - LEGAL
EDA SCHUNK THOMPSON, SHERIDAN COUNTY CLERK

NO. 2021-765861 AFFIDAVIT OF SURVIVORSHIP
EDA SCHUNK THOMPSON, SHERIDAN COUNTY CLERK
SHERIDAN COUNTY TITLE INSURANCE AG 23 S MAIN STREET
SHERIDAN WY 82801



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This is a true certification of the document on file in the office of Vital Statistics Services, Cheyenne, Wyoming.

DATE ISSUED: December 04, 2020

This copy is not valid unless prepared on paper with an engraved border.

Guy Beaudoin
Guy Beaudoin
Deputy State Registrar

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE