

2022-781575 9/22/2022 2:46 PM PAGE: 1 OF 4 FEES: \$21.00 PK AFFIDAVIT OF SURVIVORSHIP - LEGAL EDA SCHUNK THOMPSON, SHERIDAN COUNTY CLERK

AFFIDAVIT OF DEATH AND SURVIVORSHIP

STATE OF WYOMING)	
	:	S.S.
COUNTY OF SHERIDAN)	

Rebecca Jo Rader, residing in Sheridan County, Wyoming, at 56 Meade Creek Road, Sheridan, Wyoming, being first duly sworn according to law, and in accordance with Wyo. Stat. Ann. § 2-9-102 (LexisNexis 2021), deposes and states:

- 1. That the undersigned affiant is the surviving daughter of **Lenard C. Fall**, who died of natural causes in Yellowstone County, Montana, on January 29, 2018, as shown by the certified copy of the Certificate of Death attached hereto and made a part hereof by this reference as Exhibit "A" and **Dorothy Lee Fall**, **aka Dorothy L. Fall**, who died of natural causes in Sheridan County, Wyoming, on May 25, 2022, as shown by the certified copy of the Certificate of Death attached hereto and made a part hereof by this reference as Exhibit "B."
- 2. That this affidavit concerns the following described real property located in Sheridan County, Wyoming, owned by the above-named Decedents, Lenard C. Fall and Dorothy Lee Fall, aka Dorothy L. Fall, husband and wife, as tenants by the entireties with full right of survivorship, as designated and described in a certain Transfer on Death Deed from Lenard C. Fall and Dorothy L. Fall, husband and wife, as tenants by the entireties with full right of survivorship, to Rebecca Jo Rader, dated March 9, 2015, and recorded in the office of the County Clerk for Sheridan County, Wyoming, on March 10, 2015, in Book 552 of Deeds, at Page 174, as Document No. 2015-718047, to-wit:

Lot 29 of The Haven at Holly Ponds, a subdivision in Sheridan County, Wyoming, filed in the office of the Sheridan County Clerk in Drawer H, Plat Number 44;

TOGETHER WITH all improvements, hereditaments and appurtenances thereunto belonging or appertaining thereto;

SUBJECT TO all exceptions, reservations, rights-of-way, easements, covenants restrictions, and rights of record and subject of any state of facts which would be disclosed by an accurate survey or physical inspection of the premises and subject to building and zoning regulations and city, state and county subdivision laws.

3. That the death of the said Dorothy L. Fall has terminated her interest in the above-described property and vested the same exclusively in the undersigned affiant, Rebecca Jo Rader.

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DATED this day of August, 2022.

Rebecca Jo Rader

The foregoing instrument was acknowledged before me, a notary public for the State of Wyoming, on the \omega day of August, 2022, by Rebecca Jo Rader.

Witness my hand and official seal.

JENNIFER E. GULLEY - NOTARY PUBLIC

COUNTY OF STATE OF WYOMING

My Commission Expires January 10, 2023

Notary Rublic

My commission expires:



YELLOWSTONE COUNTY

CERTIFICATION OF A DEATH CERTIFICATE

FILE #: 201856-000899

SEX: Male

PLACE OF DEATH: BILLINGS DATE OF DEATH: January 29, 2018

White RACE:

FULL NAME OF DECEASED:

October 29. BIRTHPLACE: Custer, South Dakota DATE OF BIRTH:

MOTHER'S NAME: Maude Drake FATHER'S NAME: Robert Fall

MARITAL STATUS: Married

SPOUSE: Dorothy Fall

520-26-4758 **VETERAN OF ARMED FORCES:** SOCIAL SECURITY NUMBER:

RESIDENCE: Sheridan, Wyoming

Smith Funeral Chapel FUNERAL FACILITY: Kane Funeral Services PLACE OF DISPOSITION:

Sheridan Wyoming

Lenard C Fall

Cremation METHOD OF DISPOSITION:

February 08, 2018 MANNER OF DEATH: DATE FILED:

CAUSE OF DEATH: 3 MINUTES RESPIRATORY FAILURE

ASPIRATION PNEUMONIA

OTHER SIGNIFICANT CONDITIONS:

CONGESTIVE HEART FAILURE

NAME AND ADDRESS OF CERTIFIER: Faranak Argani , BOX 31598, Billings, Montana 59107

DATE ISSUED: February 08, 2018

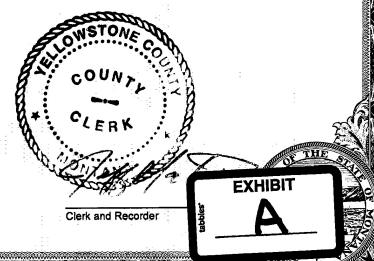
2 WEEKS



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This certifies that this document is a true duplication of the original information on file with the Department of Public Health and Human Services.



DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

Decedent:

2022-002244 State File Number:

Name:

Dorothy Lee Fall

Sex: Female Date of Birth: March 14, 1931 Social Security Number: Age at the Time of Death: 504-26-0778 91 years

Date and Place of Death:

Date of Death:

May 25, 2022

County of Death:

Sheridan

City of Death: Location:

Sheridan

Memorial Hospital of Sheridan County 1401 West 5th Street

Additional Decedent Information:

Place of Birth: Residence: Marital Status: Moorcroft, Wyoming Sherldan, Wyoming

Widowed

Armed Forces: Name of Father:

Name of Mother:

Merle E. Seelev Ruth Chastine Stevenson

Informant:

Shane Rader

Relationship:

Grandson

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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) Aspiration Pneumonia

6 Davs

Other Significant

Conditions:

Recent Right Femoral Neck Fracture

Natural Death

Time of Death:

18:30 (Actual)

Injury Information:

Manner of Death:

May 21, 2022 (Actual)

Time Of Injury:

Date Of Injury: Injury At Work?

Approximate 19:00 ±1hr

Location:

Description:

1142 Park View Ct, Sheridan, Wyoming

Decedent suffered an unobserved ground-level fall while at home, fracturing the right hip.

Certifier:

Type:

Physician

Name:

Kris Schamber, M.D.

Address:

1333 West 5th Street, S 112, Sheridan, WY, 82801

Date Filed:

June 03, 2022

NO. 2022-781575 AFFIDAVIT OF SURVIVORSHIP

EDA SCHUNK THOMPSON, SHERIDAN COUNTY CLERK

HEALY LAW FIRM LLC

P O BOX 605 SHERIDAN WY 82801



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

DATE ISSUED:

September 09, 2022

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

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EXHIBIT