

Affidavit of Survivorship

State of Wyoming

County of Sheridan

I Loretta Anderson, residing at 2388 EXCALIBER WAY, Sheridan, Wyoming 82801, being of legal age, depose and say that:

1. On July 14, 2022, by Warranty Deed recorded as document number 2022-780153 ('the Deed'), of the Sheridan County records the Affiant and Carl B Anderson become owners of the following legally described property:
Lot 16, Hidden Bridge Ranch Subdivision as platted in Book H of Plats on Page 65, City of Sheridan, Sheridan County, Wyoming
2. Affiant and Carl B Anderson own the property in joint tenancy with right of survivorship.
3. On March 10, 2025, Carl B Anderson, died, thereby terminating Carl B Anderson's interest in the above-described real property. A certified copy of the death certificate of Carl B Anderson is attached hereto as Exhibit A.

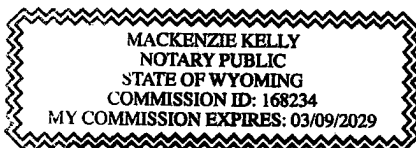
Oath or Affirmation

I certify under penalty of perjury under Wyoming law that I know the contents of this affidavit signed by me and that the statements are true and correct.

Loretta Anderson
Loretta Anderson

April 3, 2025
Date

STATE OF WYOMING, COUNTY OF SHERIDAN, ss: This Affidavit was acknowledged before me on this 3rd day of April, 2025 by Loretta Anderson, who, being first duly sworn on oath according to law, deposes and says that he/she has read the foregoing Affidavit subscribed by him/her, and that the matters stated herein are true to the best of his/her information, knowledge and belief.



[Signature]
Notary Public

UPS Store Associate
Title (and Rank)

My commission expires 03/09/2029

STATE OF WYOMING

CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

Decedent:
Name: Carl Bob Anderson
Sex: Male
Date of Birth: February 10, 1947
State File Number: 2025-000990
Social Security Number: 520-48-8235
Age at the Time of Death: 78 years

Date and Place of Death:
Date of Death: March 10, 2025
City of Death: Sheridan
County of Death: Sheridan
Location: Memorial Hospital of Sheridan County 1401 West 5th Street

Additional Decedent Information:

Place of Birth: Worland, Wyoming
Residence: Sheridan, Wyoming
Marital Status: Married - Loretta White
Armed Forces: No
Name of Father: Ove Anderson
Name of Mother: Rozina Wilson
Informant: Loretta Anderson

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FEES: \$15.00 PK AFFIDAVIT OF SURVIVORSHIP - LEGAL
EDA SCHUNK THOMPSON, SHERIDAN COUNTY CLERK

Relationship: Wife

Disposition:
Method of Disposition: Cremation
Place of Disposition: Sheridan - Johnson County Cremation Services, Buffalo, Wyoming

Funeral Home or Facility:
Facility: Sheridan Funeral Home and Cremations, Sheridan, Wyoming

Cause of Death:

The immediate cause is listed on the first line followed by any underlying causes.

(a) Complications from Advanced Vascular Dementia

Interval:
Years

Other Significant Conditions:

Manner of Death: Natural Death
Time of Death: 12:07 (Actual)

Certifier:

Type: Physician
Name: Sierra Gross, MD
Address: 1401 West 5th Street, Sheridan, WY, 82801
Date Filed: March 17, 2025

NO. 2025-798270 AFFIDAVIT OF SURVIVORSHIP
EDA SCHUNK THOMPSON, SHERIDAN COUNTY CLERK
LORETTA ANDERSON 2388 EXCALIBUR WAY
SHERIDAN WY 82801

0 0 1 5 2 8 3 6 3

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

DATE ISSUED: March 18, 2025

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

Kyndra Herrera
Kyndra Herrera
Deputy State Registrar

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE