

**AFFIDAVIT OF SURVIVORSHIP**

STATE OF WYOMING                    )  
  : ss.  
COUNTY OF SHERIDAN                )

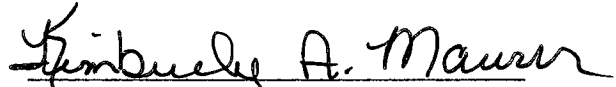
I, **Kimberely A. Maurer**, being first duly sworn upon my oath depose and state as follows:

1. This Affidavit is made, executed, and recorded pursuant to Wyo. Stat. § 2-9-102.
2. I am an adult and a resident of Sheridan County, Wyoming, and I reside at 1755 North Heights Dr., Sheridan, Wyoming.
3. I am the surviving spouse of Garwin DeWayne Maurer, who at the time of his death was a resident of Sheridan County, Wyoming, and owned an interest in real property and improvements located in Sheridan County, Wyoming.
4. I certify that Garwin DeWayne Maurer died on October 30, 2025, in Sheridan County, Wyoming. Attached hereto is a copy of the official Death Certificate of Garwin DeWayne Maurer, certified to by the public authority in which the original Death Certificate is a matter of record.
5. On September 19, 1996, Mark Aaron Ritchie and Stephanie Yvette Ritchie, husband and wife, Grantors, executed and delivered a Warranty Deed to Garwin DeWayne Maurer and Kimberely A. Maurer, husband and wife as tenants by the entirety, Grantees. The Warrant Deed was recorded on September 26, 1996, in Book 382, Page 228, as Document No. 238142, in the Office of the Sheridan County Clerk, Sheridan County, Wyoming, and conveyed to the Grantees the following described real estate, situated in Sheridan County, State of Wyoming:  
  
Lot 2, Block 13, North Heights.  
  
A subdivision in Sheridan County, Wyoming, as recorded in Book 1 of Plats, Page 215.  
  
TOGETHER WITH all improvements situate thereon and all appurtenances thereunto appertaining or belonging.  
  
SUBJECT TO all exceptions, reservations, rights-of-way, easements, covenants, restrictions, and rights of record and subject to 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.
6. The effect of the Warranty Deed referred to in Paragraph 5, above was to create a tenancy by the entireties with full right of survivorship in Garwin DeWayne Maurer and Kimberely A. Maurer, husband and wife.



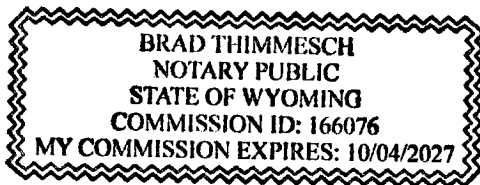
7. Upon the death of Garwin DeWayne Maurer, the tenancy by the entirety in and to the property described in Paragraph 5, above, terminated, and I, Kimberly A. Maurer, became the sole owner in fee simple of the property described in Paragraph 5, above.


DATED this 17 day of December 2025.

  
Kimberely A. Maurer

Subscribed, sworn to, and acknowledged before me on this 17<sup>th</sup> day of December 2025,  
by **Kimberely A. Maurer**.

WITNESS my hand and official seal.



  
Notary Public

My Commission Expires: 10/04/2027

# STATE OF WYOMING

CERTIFICATION OF VITAL RECORD

## DEPARTMENT OF HEALTH

### CERTIFICATE OF DEATH

#### Decedent:

Name: Garwin DeWayne Maurer  
Sex: Male  
Date of Birth: March 16, 1954

#### State File Number:

2025-004276

#### Social Security Number:

502-64-7721

#### Age at the Time of Death:

71 years

#### Date and Place of Death:

Date of Death: October 30, 2025  
City of Death: Sheridan  
Location: 1755 North Heights Drive

#### County of Death:

Sheridan

#### Additional Decedent Information:

Place of Birth: Fargo, North Dakota  
Residence: Sheridan, Wyoming  
Marital Status: Married - Kimberly Anne Higgins  
Armed Forces: No  
Name of Father: Glen Maurer  
Name of Mother: Jeannine Halverson  
Informant: Kimberly Anne Maurer



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FEES: \$18.00 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) Peripheral Vascular Disease

#### Interval:

Years

#### Other Significant Conditions:

Hypertension, Hyperlipidemia, Carotid Stenosis, Abdominal Aortic Aneurysm, Chronic Hepatitis C

#### Manner of Death:

Natural Death

#### Time of Death:

07:53 (Actual)

#### Certifier:

Type: Coroner  
Name: Robert Byrd, Coroner  
Address: 1604 North Main St, Sheridan, WY 82801

#### Date Filed:

November 06, 2025

**NO. 2025-804256 AFFIDAVIT OF SURVIVORSHIP**  
EDA SCHUNK THOMPSON, SHERIDAN COUNTY CLERK  
YONKEE & TONER P O BOX 6288  
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: November 07, 2025**

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

Kyndra Herrera  
Deputy State Registrar

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE