


STATE OF WYOMING       )  
                                      : ss.  
County of Sheridan        )

  
**2021-767924**    4/6/2021 9:52 AM PAGE: 1 OF 3  
FEES: \$18.00 PK AFFIDAVIT OF SURVIVORSHIP - LEGAL  
EDA SCHUNK THOMPSON, SHERIDAN COUNTY CLERK

**AFFIDAVIT OF SURVIVORSHIP**  
**CONCERNING OWNERSHIP OF REAL ESTATE**

Amy S. Wilson, after being duly sworn upon oath, does depose and say:

1.       This Affidavit is made in compliance with Wyoming Statutes, Sec. 2-9-102 to establish the termination of a tenancy by the entireties due to the death of one of the tenants.

2.       Affiant is the surviving spouse of Cody Lee Wilson who died on January 20, 2021. A certified copy of the Death Certificate of the said Cody Lee Wilson is attached hereto as Exhibit A.

3.       At the time of the death of the said Cody Lee Wilson, he and the undersigned Affiant were owners, as tenants by the entireties, of an interest in certain real estate which is located in Sheridan County, Wyoming, and which is more particularly described as follows:

Lot number 4 and the South 26 feet of Lot number 3, Block number 9, Kilbourne Addition to the Town, now City, of Sheridan, Sheridan County, Wyoming.

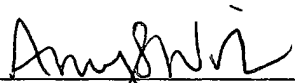
4.       The Affiant and Cody Lee Wilson acquired their interest in the above described property by means of a Deed which is dated December 22, 2015, and which was recorded in the office of the County Clerk and Recorder of Sheridan County, Wyoming, in Book 557 of Deeds at page 376 on December 23, 2015.



5. Due to the death of the said Cody Lee Wilson, the Affiant has become the sole owner of the above described property.

FURTHER AFFIANT SAYETH NOT.

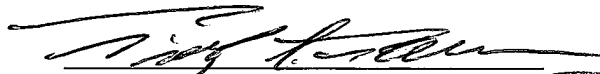
DATED this 5 day of April, 2021.

  
\_\_\_\_\_  
Amy S. Wilson

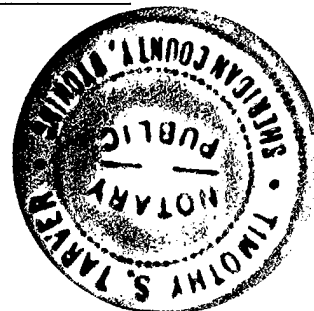
STATE OF WYOMING     )  
                                      : ss.  
County of Sheridan     )

The above and foregoing Affidavit of Survivorship was subscribed, sworn to and acknowledged before me by Amy S. Wilson this 5<sup>th</sup> day of April, 2021.

WITNESS my hand and official seal.

  
\_\_\_\_\_  
Notarial Officer

My Commission expires: March 10, 2025





STATE OF CALIFORNIA	
CERTIFICATION OF VITAL RECORD	
COUNTY OF SAN DIEGO	CERTIFICATE OF DEATH
LOCAL REGISTRATION NUMBER 3202137002687	STATE FILE NUMBER STATE OF CALIFORNIA USE BLACK INK ONLY / NO ERASERS, WHITEOUTS OR ALTERATIONS. LAST FIRST MIDDLE NAME OF DECEDENT FIRST (A.V.M.) DATE OF BIRTH