20250707000204000 1/3 $31.00
Shelby Cnty Judge of Probate, AL
07/07/2025 11:53:41 AM FILED/CERT

STATE OF ALABAMA)
:
SHELBY COUNTY)

AFFIDAVIT OF HEIRSHIP OF KIM M. ANDREASEN

Before me, the undersigned, personally appeared VALORIE KAE ANDREASEN, who, after first being duly sworn, deposes and says the following:

1. My name is VALORIE KAE ANDREASEN. I am over the age of 21 years and reside at 4288 Highway 42, Calera, Alabama 35040. I have personal knowledge of the matters and things set forth herein.

2. I the surviving spouse of KIM M. ANDREASEN ("Kim"). Kim died in Shelby County, Alabama, on November 24, 2024. A copy of his death certificate is attached hereto and incorporated herein by reference as **Exhibit A**.

3. At the time of his death, he we were married for ____ years. We had four (4) children of their marriage, Brian Kim Andreasen, Heidi Lyn Panter, Kacey Lee Andreasen and Karsen Brett Andreasen. Neither of us had any other natural born or adopted children.

4. At the time of his death, Kim and I lived in Calera, in Shelby County, Alabama.

5. At the time of his death, Kima and I jointly owned the real property located in Franklin County, Idaho and specifically that property located at 5604 E. Thatcher Road, Preston, ID 83263.

6. It is my understanding that there was never any estate administration for Kim in the Probate Court of Shelby County, Alabama, or elsewhere. All of our assets were jointly owned.

7. This Affidavit is made for the purpose of establishing the ownership of real property titled in the name of KIM M. ANDREASEN at the time of his death, with the knowledge that this Affidavit may be used as evidence in court or filed of record in any Probate Office for future reference.

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Further the Affiant sayeth naught.

Done and dated this 7 day of July, 2025.

Valorie Kae Andreasen
Signature of Affiant

Printed name: VALORIE KAE ANDREASEN

STATE OF ALABAMA)

Shelby COUNTY)

Sworn to and subscribed before me, this the
7 day of July, 2025.

Notary Public—State at Large
My Commission Expires: 6-7-2028

This instrument prepared by:

Dorothy Lee Donaldson, Esq.
Dentons Sirote PC
2311 Highland Avenue South (35205)
P. O. Box 55727
Birmingham, AL 35255-5727
Telephone (205) 930-5130
dorothy.donaldson@sirote.com

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THE FRONT OF THIS DOCUMENT IS PINK - THE BACK OF THIS DOCUMENT IS BLUE AND HAS AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

ALABAMA
Center for Health Statistics
ALABAMA CERTIFICATE OF DEATH

State File Number 101 2024-50640

1. DECEASED LEGAL NAME: Kim M Andreasen				2. DATE AND TIME OF DEATH: Nov 24, 2024 1550
3. ALIAS NAME(IF ANY): None Given				4. DATE AND TIME PRONOUNCED DEAD
5. COUNTY OF DEATH: Shelby	6. CITY, TOWN OR LOCATION OF DEATH AND ZIP CODE: Calera, 35040		7. PLACE OF DEATH: 4288 Hwy 42	
8. SEX: Male	9. LAST NAME PRIOR TO FIRST MARRIAGE			10. SERVED IN ARMED FORCES: No

11. AGE	UNDER 1 YEAR		UNDER 1 DAY		12. DATE OF BIRTH	13. BIRTHPLACE (State or Foreign Country)	14. SOCIAL SECURITY NUMBER
	MONTHS	DAYS	HRS	MINS			
70					Jul 14, 1954	Idaho	[redacted]

15. MARITAL STATUS	16. SURVIVING SPOUSE NAME PRIOR TO FIRST MARRIAGE	17. RESIDENCE STATE
Married	Valorie Kae Gee	Alabama

18. RESIDENCE COUNTY	19. CITY, TOWN OR LOCATION AND ZIP CODE	20. STREET ADDRESS
Shelby	Calera, 35040	4288 Hwy 42

21. INFORMANT NAME, RELATIONSHIP AND ADDRESS: Valorie Andreasen, Wife, 4288 Hwy 42, Calera, AL 35040

22. FATHER/PARENT NAME PRIOR TO FIRST MARRIAGE	23. MOTHER/PARENT NAME PRIOR TO FIRST MARRIAGE
Max Wayne Andreasen	Emma Mardene Harris

24. DISPOSITION OF BODY	25. CEMETERY OR CREMATORY	26. LOCATION
Cremation	W E Lusain Funeral Home	Birmingham, Alabama

27. DATE OF DISPOSITION	28. FUNERAL DIRECTOR OR OTHER AGENT	29. LICENSE NUMBER	30. DATE SIGNED
Nov 27, 2024	Ethelyn R Lusain,		Dec 3, 2024

31. FUNERAL HOME NAME AND ADDRESS	32. LICENSE NUMBER
W E Lusain Funeral Home, 629 Goldwire Way SW, Birmingham, AL 35211	1021

33. **MEDICAL CERTIFICATION:** Certifying Physician

34. NAME	35. LICENSE NUMBER	36. DATE SIGNED
Megan Vansant Bullard MD	33298	Dec 2, 2024

37. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH: 122 7th Avenue NE, Suite D, Alabaster, Alabama 35007

38. REGISTRAR	39. DATE FILED
Nicole Henderson Rushing	Dec 3, 2024

CAUSE OF DEATH

40. PART I. DISEASES, INJURIES OR COMPLICATIONS THAT CAUSED DEATH

IMMEDIATE CAUSE — A. COPD W Acute Exacerbation

DUE TO (OR AS A CONSEQUENCE OF):

UNDERLYING CAUSE — B.

DUE TO (OR AS A CONSEQUENCE OF):

C.

DUE TO (OR AS A CONSEQUENCE OF):

D.

INTERVAL: Unknown

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41. PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH

42. MANNER OF DEATH	43. PREGNANT (IF FEMALE)	44. AUTOPSY	45. FINDINGS CONSIDERED	46. TOXICOLOGY	47. FINDINGS CONSIDERED	48. TOBACCO USE CONTRIBUTED TO DEATH
Natural Causes		No		No		Unknown

49. HOW INJURY OCCURRED

50. DATE AND TIME OF INJURY	51. INJURY AT WORK	52. IF TRANSPORTATION INJURY, SPECIFY
53. PLACE OF INJURY	54. LOCATION OF INJURY	

ADPH HS E2/REV 01-21

This is an official certified copy of the original record filed in the Center of Health Statistics, Alabama Department of Public Health, Montgomery, Alabama. 2024-500-277-0

December 3, 2024

Nicole H. Rushing

Nicole Henderson Rushing
State Registrar of Vital Statistics