When recorded mail to: Marcella Kay Mcphee 3224 S Verdant Circle SLC, UT 84109

14304665 B: 11527 P: 5878 Total Pages: 3 10/24/2024 12:31 PM By: dsalazar Fees: \$40.00 Rashelle Hobbs, Recorder, Salt Lake County, Utah Return To: EAGLE GATE TITLE INSURANCE AGENCY, INC. 59 W UNIVERSITY PKWYOREM, UT 84058

# AFFIDAVIT OF SUCCESSOR TRUSTEES UPON DEATH OF TRUSTEE

C

Marcella Kay McPhee and Gary Kidd Poulton (Affiants), being of legal age and being first duly sworn, depose and state as follows:

- 1. This Affidavit is given to evidence the death of Marcella K. Poulton ("Decedent"), Trustee of the Marcella K. Poulton Trust dated June 22, 1998, as amended January 20, 1999 and December 5, 2006, named as Grantee in that certain Warranty Deed dated January 3<sup>rd</sup>, 2013, and recorded January 8<sup>th</sup> 2013, as Entry No. 11552318, recorded in the office of the Salt Lake County Recorder, State of Utah, and the subsequent appointment of Marcella Kay McPhee and Gary Kidd Poulton.
- 2. Affiants hereby certify that Decedent named above is one and the same individual named in that particular Certificate of Death, attached hereto and by this reference made a part hereof.
- 3. By virtue of said Death Certificate and the above-referenced Trust Agreement, Affiants do hereby declare that the conditions for the appointment of Trustee have been met and that, pursuant to said Trust Agreement, the Affiants are now authorized as Trustees to sell, convey, or otherwise distribute, encumber or manage the Trust assets. This affidavit is given with specific reference to the sale, conveyance, or other distribution from the Trust Estate of that certain real property locating in Salt Lake County, State of Utah and more particularly described as follows:

Lot 3. VERDANT HEIGHTS SUBDIVISION NO. 4, according to the Official Plat thereof.

APN: 16-27-306-004-0000



# **CERTIFICATE OF DEATH**

State File Number: 2022017961

Marcella Kidd Poulton

#### **DECEDENT INFORMATION**

Date of Death: October 17, 2022
City of Death: Salt Lake City

Age:

Place of Birth: Rigby, Idaho

Armed Services: No Spouse's Name:

Industry/Business: Own Home

Residence: Salt Lake City, Utah

Mother's Name: Elgy Ora Whittle

Facility or Address: 3658 Wild Rose Lane

Time of Death: 03:30 Salt Lake

Date of Birth: October 7, 1923

Sex: Female
Marital Status: Widowed
Usual Occupation: Homemaker

Education: High School or GED

Father's Name: James Andrew Hobson Kidd

Facility Type: Home

#### INFORMANT INFORMATION

Name: Marcy McPhee Relationship: Daughter

Mailing Address: 2043 East Keller Lane, Salt Lake City, Utah 84109

## **DISPOSITION INFORMATION**

Method of Disposition: Burial

Place of Disposition: Mountain View Memorial Estates, Salt Lake City, Utah

Date of Disposition: October 24, 2022

### **FUNERAL HOME INFORMATION**

Funeral Home: Mountain View Memorial Mortuary

Address: 7800 South 3115 East, Salt Lake City, Utah 84121

Funeral Director: Francis L Mortensen

### **MEDICAL CERTIFICATION**

Certifying Physician: Ronak Iqbal MD, Granger Medical Clinic, 3725 West 4100 South, West Valley City, Utah 84120

## **CAUSE OF DEATH**

Congestive Heart Failure Stage 4

Due to (or as a consequence of): Atrial Fibrillation Due to (or as a consequence of): Hypertension

Due to (or as a consequence of): Congestive Heart Failure Stage 4

Tobacco Use: Non-user

Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Registered: October 24, 2022
Date Issued: December 5, 2022

#### **AMENDMENT HISTORY**

12/02/2022 Decedent First Name from Macella to Marcella

This is an exact reproduction of the facts registered in the Utah State Office of Vital Records and Statistics.

Security features of this official document include: Intaglio Border, V & R images in top cycloids, and intaglio microtext.

This document displays the date, seal and signature of the Utah State Registrar of Vital Record and Statistics.

Linda S. Wininger, MSW, LCSW

State Registrar



Angela C. Dunn, MD, MPH Director/Health Officer County/District Health Department SALT LAKE COUNTY HEALTH DEPARTMENT

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ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE