

Mail Tax Notice To:  
Victoria R. Witherow, Trustee  
1860 E. Southmoor Drive  
Salt Lake City, UT 84117

14411699 B: 11587 P: 829 Total Pages: 4  
07/18/2025 03:54 PM By: tpham Fees: \$40.00  
Rashelle Hobbs, Recorder, Salt Lake County, Utah  
Return To: THE FADEL LAW FIRM  
170 W 400 S BOUNTIFUL, UT 840106226

## **AFFIDAVIT OF SUCCESSOR TRUSTEE**

STATE OF UTAH :  
County of Davis : ss.  
:

VICTORIA R. WITHEROW, being first duly sworn under oath, states as follows:

1. The ARVON L. ROSENHAN REVOCABLE LIVING TRUST, dated January 20, 1998, also known as the 1998 ARVON AND BARBARA ROSENHAN REVOCABLE LIVING TRUST under instrument dated January 20, 1998, owns certain real property located in Salt Lake County, State of Utah, and more particularly described as follows:

### **LOT 23, COTTONWOOD MEADOWS, A, B & C AM'D SUB**

**Parcel No. 22-09-428-016-0000**

2. Title to the described property vested in the ARVON L. ROSENHAN REVOCABLE LIVING TRUST, dated January 20, 1998, in a document recorded August 28, 2015, as entry 12121822, in book 10356, page 6999-7000 in the records of the Salt Lake County Recorder. An Affidavit and Certification of Trust Existence and Trustees was recorded on June 7, 2023, as entry 14115088, in book 11424, page 4016, removing BARBARA L. ROSENHAN, also known as BARBARA LOTT ROSENHAN as Trustee and adding ARVON L. ROSENHAN and VICTORIA R. WITHEROW as co-Trustees.

3. Pursuant to the terms of the ARVON L. ROSENHAN REVOCABLE LIVING TRUST, dated January 20, 1998, ARVON L. ROSENHAN, also known as ARVON LEE ROSENHAN has been removed as Trustee.

4. Pursuant to the terms of the ARVON L. ROSENHAN REVOCABLE LIVING TRUST, dated January 20, 1998, VICTORIA R. WITHEROW is now serving as sole Trustee.

5. Title to the property should be held as:

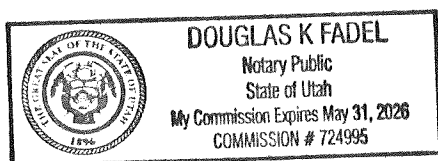
**VICTORIA R. WITHEROW, as Trustee of the ARVON L. ROSENHAN REVOCABLE LIVING TRUST, dated January 20, 1998.**

DATED this 17 day of July, 2025.

Victoria R. Witherow  
VICTORIA R. WITHEROW, Trustee

Subscribed and sworn before me on this 17 day of July, 2025  
by, VICTORIA R. WITHEROW as Trustee.

[Signature]  
NOTARY PUBLIC



STATE OF UTAH  
CERTIFICATION OF VITAL RECORD

CERTIFICATE OF DEATH

State File Number: 2025011808

Arvon Lee Rosenhan

DECEDENT INFORMATION

Date of Death:	July 3, 2025	Time of Death:	05:00
City of Death:	Millcreek	County of Death:	Salt Lake
Age:	93	Date of Birth:	July 24, 1931
Place of Birth:	Salt Lake City, Utah	Sex:	Male
Armed Services:	Yes	Marital Status:	Widowed
Spouse's Name:	Barbara June Lott (Deceased)	Usual Occupation:	Aircraft Mechanic
Industry/Business:	Airline	Education:	High School or GED
Residence:	Holladay, Utah	Father's Name:	Armin Alfred Rosenhan
Mother's Name:	Violet Elizabeth Christensen	Facility Type:	Rehabilitation Facility
Facility or Address:	Monument Health Millcreek		

INFORMANT INFORMATION

Name:	Victoria Rosenhan Witherow	Relationship:	Daughter
Mailing Address:	1860 East Southmoor Drive, Holladay, Utah 84117		

DISPOSITION INFORMATION

Method of Disposition:	Burial
Place of Disposition:	Holladay Memorial Park, Holladay, Utah
Date of Disposition:	July 12, 2025

FUNERAL HOME INFORMATION

Funeral Home:	Cottonwood Memorial Mortuary
Address:	4670 Highland Drive, Salt Lake City, Utah 84117
Funeral Director:	Carlyann Kent

MEDICAL CERTIFICATION

Certifying Physician:	Richard E Allen MD, St Marks Hospital , 1250 East 3900 South Suite 260, Salt Lake City, Utah 84124
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CAUSE OF DEATH

Aspiration pneumonia [Onset: 2 Weeks]  
Due to (or as a consequence of): Congestive heart failure from heart valve disease  
Tobacco Use: Non-user  
Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Registered: July 8, 2025

Date Issued: July 8, 2025

14411699 B: 11587 P: 831

Page 3 of 4

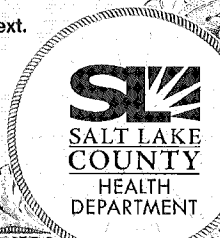
This is an exact reproduction of the facts registered in the Utah State Office of Vital Records and Statistics.  
Security features of this official document include: Intaglio Border, V & R images in top cycloids, and intaglio microtext.  
This document displays the date, seal and signature of the Utah State Registrar of Vital Record and Statistics.



*Nicole Bissonette*  
Nicole Bissonette, MPH, MCHES  
State Registrar  
Rev 12/21



*Dorothy Adams*  
Dorothy Adams, MPA, LEHS  
Director/Health Officer  
County/District Health Department



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Office of Vital Records and Statistics  
**Affidavit to amend a record**

Corrections to a vital record may be made by affidavit but an item on a birth record may be corrected by affidavit only once. A court order is required for gender or name changes after the age of one year. This form is not used with a court order. A court order is necessary to make any corrections to a Delayed Birth Certificate. This affidavit cannot be used to correct medical information. Many changes, including marital status, require more information; visit our website or contact our office. Please return any copies of the certificate with this completed affidavit and all supporting documentation. If corrected certificates are reissued within 90 days of issuance, the new certificate fee will be waived but affidavit fees may still apply. This affidavit may be mailed with the correct fees, proof of ID and application for a new certificate.



online instructions

**Mailing address:** Office of Vital Records and Statistics PO Box 141012 Salt Lake City, UT 84114-1012

**Contact information:** <https://VitalRecords.utah.gov> 801-538-6105 vrequest@utah.gov

**Affidavit instructions:** Print or type. **Items 1-6:** Enter the facts as reported on the current vital record. **Item 7:** Enter the item number from items 1-6 that will be changed, if applicable. **Item 8a:** Enter the information as stated on the original record. **Item 8b:** Enter the correct information as it should be stated. **Item 9:** Enter the reason the change is necessary. **Item 10:** Enter the proofs used to support the change. The proofs must match the asserted fact(s) exactly. Proofs must be submitted with the affidavit. **Items 11-22:** Enter witness information.

**Witnesses for birth certificate:** If the person listed on the record is under 18 years of age, both parents of record must sign the affidavit. If only one parent is listed, the second witness must be an immediate family member of the listed parent. If the person listed on the record is 18 years of age or older, he/she must sign as one of the witnesses. The second witness must be their immediate family member.

**Witnesses for death certificate:** The informant and an immediate family member or two immediate family members must sign as a witness. If adding a spouse, the spouse must sign as a witness. If no immediate family, a person who is knowledgeable of the facts may sign.

☐ Birth      ☐ Death      ☐ Stillbirth      State file number: \_\_\_\_\_

Information as reported on the record	1a. First name		1b. Middle name		1c. Last name	
	2. Sex	3. Date of event		4. Place of occurrence (City and County)		
	5. Name of parent 1 (Maiden name if applicable)			6. Name of parent 2 (Maiden name if applicable)		
Statement of amendments	7. Item no.	8a. Facts exactly as on original record			8b. Correct information	
Why the change is needed	9. _____					
Documents used	10. _____					
Oath of first witness	I hereby certify under penalty of perjury, that I have personal knowledge of the above facts and that the information given is true and correct.					Subscribed to and Sworn to before me this ____ day of ____ 20__.
	11a. Signature of witness (sign in front of notary)		11b. Printed name of witness		State _____ County _____	
	12. Date signed	13. Age of witness	14. Telephone number		15. Relationship to 1a.	
	16. Address of witness					Notary signature _____
Oath of second witness	I hereby certify under penalty of perjury, that I have personal knowledge of the above facts and that the information given is true and correct.					Subscribed to and sworn to before me this ____ day of ____ 20__.
	17a. Signature of witness (sign in front of a notary)		17b. Printed name of witness		State _____ County _____	
	18. Date signed	19. Age of witness	20. Telephone number		21. Relationship to 1a.	
	22. Address of witness					Notary signature _____