

After Recording Return to:

Junetta A Gwilliam
2888 South 500 W,
Bountiful, UT 84010-7704

(Space for Recording Information)

Mail Tax Statements To:

Junetta A. Gwilliam, Surviving Trustee
2888 South 500 W
Bountiful, UT 84010

Assessor's Parcel No: 06-101-0031

AFFIDAVIT OF SUCCESSOR CO-TRUSTEE
RE: DEATH OF TRUSTEE

STATE OF Utah)
COUNTY OF Davis)

JUNETTA A. GWILLIAM, as the Surviving Trustee of The Robert L. Gwilliam and Junetta A. Gwilliam Family Trust, dated the 24th day of February, 1993, of legal age, being first duly sworn, declares as follows:

1. Robert Lefler Gwilliam, the decedent mentioned in the attached certified copy of Certificate of Death, who died on May 2, 2015, is the same person as Robert L. Gwilliam, Co-Trustee of The Robert L. Gwilliam and Junetta A. Gwilliam Family Trust, dated the 24th day of February, 1993, named as the Grantee in that certain Warranty Deed dated 02/24/2015, executed by Robert L. Gwilliam and Junetta A. Gwilliam, as Grantors, recorded as Entry No. 2852086, Book 6216, Page 1131 on 03/04/2015, of the Official Records of Davis County, State of Utah, covering the following described real property located in Davis County, Utah:

THE EAST 150 FEET OF LOT 3, BLOCK 1, IRFRED PARK SUBDIVISION, AMENDED PLAT, OF SECTION 36, TOWNSHIP 2 NORTH, RANGE 1 WEST, SALT LAKE MERIDIAN, IN THE CITY OF BOUNTIFUL, ACCORDING TO THE OFFICIAL PLAT THEREOF. SITUATE IN THE COUNTY OF DAVIS, STATE OF UTAH.

2. Affiant is Surviving Trustee who currently resides in Davis County, Utah.
3. Affiant is a Surviving Trustee, named in The Robert L. Gwilliam and Junetta A. Gwilliam Family Trust, dated the 24th day of February, 1993, and as such has full authority to act as Trustee in all respects, including all powers under Utah Code Annotated § 75-7-813 and 814. The trust is in full force and effect and **JUNETTA A. GWILLIAM** is now the Surviving Trustee of the trust.

Property Address: 2888 South 500 W, Bountiful, UT 84010

Affiant has hereunto set her hand this 9 day of March 2021.

Junetta A. Gwilliam
JUNETTA A. GWILLIAM, as the Surviving Trustee

STATE OF Utah)

COUNTY OF Davis)

SUBSCRIBED AND SWORN to before me this 9 day of March 2021, by JUNETTA A. GWILLIAM, as the Surviving Trustee.

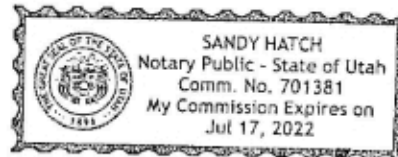
Witness my hand and official seal:

My Commission Expires:

July 17, 2022

Sandy Hatch

Notary Public



STATE OF UTAH
CERTIFICATION OF VITAL RECORD

3492303
BK 8069 PG 278

CERTIFICATE OF DEATH

State File Number: 2015006147

Robert Lefler Gwilliam

DECEDENT INFORMATION

Date of Death:	May 2, 2015	Time of Death:	10:05
City of Death:	Bountiful	County of Death:	Davis
Age:	68	Date of Birth:	January 3, 1947
Place of Birth:	Logan, Utah	Sex:	Male
Armed Services:	Yes	Marital Status:	Married
Spouse's Name:	Junetta Slaughter	Usual Occupation:	Computer Analyst
Industry/Business:	LDS Church	Education:	Bachelor's Degree
Residence:	Bountiful, Utah	Father's Name:	James Llewellyn Gwilliam
Mother's Name:	Alice Lefler	Facility Type:	Home
Facility or Address:	2888 South 500 West		

INFORMANT INFORMATION

Name:	Junetta Gwilliam	Relationship:	Wife
Mailing Address:	2888 South 500 West, Bountiful, Utah 84010		

DISPOSITION INFORMATION

Method of Disposition:	Burial
Place of Disposition:	Bountiful City Cemetery, Bountiful, Utah
Date of Disposition:	May 7, 2015

FUNERAL HOME INFORMATION

Funeral Home:	Russon Brothers Mortuary - Bountiful
Address:	295 North Main Street, Bountiful, Utah 84010
Funeral Director:	Brent C Russon

MEDICAL CERTIFICATION

Certifying Physician: Jeffery L DeGrauw MD, 1580 West Antelope Drive #200, Layton, Utah 84041

CAUSE OF DEATH

Respiratory Failure

Due to (or as a consequence of): Mediastinal Neuroendocrine Tumors

Tobacco Use: Non-user

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

Date Registered: May 8, 2015

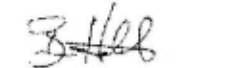
Date Issued: January 29, 2021

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: High Resolution Border, V & R images in top cycloids, and microtext. This document displays the date, seal, and signature of the Utah State Registrar of Vital Records and Statistics.


Linda S. Winger LCSW
State Registrar
Rev. 5-16



066619610


Brian Hatch
Director/Health Officer

STATE OF UTAH - DEPARTMENT OF HEALTH - OFFICE OF VITAL RECORDS AND STATISTICS

AFFIDAVIT TO AMEND A RECORD

3492303
BK 8069 PG 279

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 subsequent changes. This form is not used with a court order. A court order is necessary to make any corrections to a Delayed Birth Certificate or Death Certificate. This affidavit cannot be used to correct medical information. Many changes, including marital status, require more information; please 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 and proof of ID.

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

Physical Address: Office of Vital Records and Statistics 288 North 1460 West Salt Lake City, UT 84116

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



Affidavit Instructions: Please 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 must sign as a witness along with an immediate member of the decedent's family. If adding 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 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 IS CHANGE NEEDED?	9. _____					
DOCUMENTS USED	10. _____					
OATH OF FIRST WITNESS (MUST BE 18 OR OLDER)	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 (Must sign in front of Notary)			11b. PRINTED NAME OF WITNESS		STATE _____ COUNTY _____
	12. DATE SIGNED	13. AGE OF WITNESS	14. DAYTIME TELEPHONE		15. RELATIONSHIP TO 1a	NOTARY SIGNATURE _____
	16. ADDRESS OF WITNESS					
OATH OF SECOND WITNESS (MUST BE 18 OR OLDER)	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 (Must sign in front of Notary)			17b. PRINTED NAME OF WITNESS		STATE _____ COUNTY _____
	18. DATE SIGNED	19. AGE OF WITNESS	20. DAYTIME TELEPHONE		21. RELATIONSHIP TO 1a	NOTARY SIGNATURE _____
	22. ADDRESS OF WITNESS					

S
E
A
L