

Mail tax statements to:

Matthew Spafford Sumsion, Trustee
P.O. Box 1853
Bountiful, Utah 84011

E 3583143 B 8563 P 496-500
RICHARD T. MAUGHAN
DAVIS COUNTY, UTAH RECORDER
8/14/2024 2:19 PM
FEE 40.00 Pgs: 5
DEP AAM REC'D FOR ROWE
& WALTON PC

When recorded, return to:

Rowe & Walton PC
Britten J. Hepworth
Attorney at Law
915 South Main
Bountiful, Utah 84010

Serial No. 04-025-0022

TRUSTEE'S SURVIVOR AFFIDAVIT,
CERTIFICATE OF IDENTITY & CERTIFICATE OF INCUMBENCY

MATTHEW SPAFFORD SUMSION, hereinafter referred to as "Affiant", having been duly sworn, on oath, deposes and says:

1. Affiant is over the age of eighteen (18), is a resident of Davis County, State of Utah, is competent to testify to the matters herein, and does so from personal knowledge.
2. Affiant is the Successor Trustee to THE SUMSION FAMILY TRUST dated the 10th day of June, 2014; and that up until the date of his death, G. ALLEN SUMSION was a Trustee of said trust agreement.
3. G. ALLEN SUMSION aka GEORGE ALLEN SUMSION died on the 10th day of July, 2024; a certified copy of the death certificate acknowledging his death is attached hereto and by reference made a part hereof.
4. G. ALLEN SUMSION and LINDA SUMSION, conveyed and all interest in the below-described property to G. ALLEN SUMSION and LINDA L. SUMSION, Trustees or Successor Trustees of THE SUMSION FAMILY TRUST dated the 10th day of June, 2014, by a certain *Special Warranty Deed* recorded the 12th day of June, 2014, as Entry #2808162, Book #6038, Page #298; and that LINDA L. SUMSION died on the 30th day of August, 2022, and was removed from title on the below-described property by a *Trustee's Survivor Affidavit* recorded the 2nd day of May, 2024, as Entry #3570144, Book #8494, Pages #601-604; and G. ALLEN SUMSION aka GEORGE ALLEN SUMSION, Trustee of THE SUMSION FAMILY TRUST dated the 10th day of June, 2014, conveyed any and all interest in the below-described property to GEORGE ALLEN SUMSION and

MATTHEW SPAFFORD SUMSION, Trustee or Successor Trustees of THE SUMSION FAMILY TRUST dated the 10th day of June, 2014, by a certain *Special Warranty Deed* recorded the 2nd day of May, 2024, as Entry #3570145, Book #8494, Page #605, covering the following property situated in Davis County, State of Utah:

**ALL OF LOT 22, CENTRAL HEIGHTS SUB BLK B.
CONT. 0.23 ACRES.**

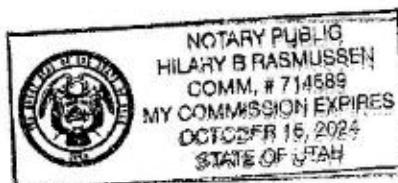
5. GEORGE ALLEN SUMSION named as the deceased in the certified copy of the death certificate hereto attached, is one and the same person as GEORGE ALLEN SUMSION aka G. ALLEN SUMSION named in said Special Warranty Deed above referred to.
6. By reason of the death of GEORGE ALLEN SUMSION, and pursuant to Article VIII., of said Trust Agreement, and the Delegation of Authority dated the 30th day of April, 2024, the Affiant has become the sole Trustee of THE SUMSION FAMILY TRUST dated the 10th day of June, 2014.
7. Affiant does hereby accept the incumbency to serve in said capacity as Trustee of said Trust, and that by reason of the death of GEORGE ALLEN SUMSION and the terms of said Trust Agreement and Delegation of Authority, the Affiant as sole Trustee and with the power and authority vested in him by reason of said Trust and Delegation of Authority, does accept the above-described property as Trustee of said Trust Agreement and the position of Trustee and agrees to perform all duties and functions according to said trust instrument.
8. The Undersigned, as Trustee of THE SUMSION FAMILY TRUST dated the 10th day of June, 2014, does hereby remove the name of GEORGE ALLEN SUMSION, Trustee of THE SUMSION FAMILY TRUST dated the 10th day of June, 2014, and said property shall be titled from this date forward as: MATTHEW SPAFFORD SUMSION, Trustee of THE SUMSION FAMILY TRUST dated the 10th day of June, 2014, of Bountiful, Davis County, State of Utah.

DATED this 12th day of August, 2024.

Matthew Spafford Sumsion
MATTHEW SPAFFORD SUMSION, Trustee
THE SUMSION FAMILY TRUST
dated the 10th day of June, 2014

STATE OF UTAH)
COUNTY OF DAVIS) :ss.

On this 12th day of August, 2024, personally appeared before me MATTHEW SPAFFORD SUMSION, Trustee of THE SUMSION FAMILY TRUST dated the 10th day of June, 2014, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to on this *TRUSTEE'S SURVIVOR AFFIDAVIT, CERTIFICATE OF IDENTITY & CERTIFICATE OF INCUMBENCY*, and acknowledged that she executed the same.



W. B. Rasmussen
NOTARY PUBLIC
Residing at Davis County

STATE OF UTAH
CERTIFICATION OF VITAL RECORD

3583143
BK 8563 PG 499

CERTIFICATE OF DEATH

State File Number: 2024011730

George Allen Sumsion

DECEDENT INFORMATION

Date of Death:	July 10, 2024	Time of Death:	02:54
City of Death:	Bountiful	County of Death:	Davis
Age:	86	Date of Birth:	March 12, 1938
Place of Birth:	Moroni, Utah	Sex:	Male
Armed Services:	No	Marital Status:	Widowed
Spouse's Name:	Linda Ann Lee (deceased)	Usual Occupation:	Business Owner
Industry/Business:	Finance	Education:	Master's Degree
Residence:	Bountiful, Utah	Father's Name:	George Spafford Sumsion
Mother's Name:	Maud Elizabeth Hansen	Facility Type:	Hospital Inpatient
Facility or Address:	Lakeview Hospital		

INFORMANT INFORMATION

Name:	Matthew Sumsion	Relationship:	Son
Mailing Address:	PO Box 1853, Bountiful, Utah 84011		

DISPOSITION INFORMATION

Method of Disposition:	Burial
Place of Disposition:	Bountiful City Cemetery, Bountiful, Utah
Date of Disposition:	July 26, 2024

FUNERAL HOME INFORMATION

Funeral Home:	Russon Mortuary - Bountiful
Address:	295 North Main Street, Bountiful, Utah 84010
Funeral Director:	Tyler J Russon

MEDICAL CERTIFICATION

Certifying Physician: Mulamalla, MD, Roja, 444 West Bourne Circle Suite 200, Farmington, Utah 84025

CAUSE OF DEATH

Cardiac arrest
Due to (or as a consequence of): Myocardial infarction
Due to (or as a consequence of): Coronary artery disease
Due to (or as a consequence of): Cardiogenic shock

Tobacco Use: Non-user

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

Date Registered: July 12, 2024

Date Issued: July 12, 2024

AMENDMENT HISTORY

07/12/2024 SSN from (Confidential) to (Confidential)

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. Wininga, MSW, LCSW
State Registrar

Rev. 12/20



* 0 6 7 7 8 9 6 0 0 *


Brian Hatch
Director/Health Officer

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.

Mailing Address: Office of Vital Records and Statistics PO Box 141012 Salt Lake City, UT 84114-1012
Contact Info: <https://VitalRecords.utah.gov> 801-538-6105 vrequest@utah.gov



online instructions

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 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 (Must 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.	Notary signature _____
	16. Address of witness				S E A L
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 (Must sign in front of notary)		17b. Printed name of witness		State _____ County _____
	18. Date signed	19. Age of witness	20. Telephone number	21. Relationship to 1a.	Notary signature _____
	22. Address of witness				S E A L