

When Recorded Mail To:  
Fred Potts  
1035 East Arlington Way  
Bountiful, Utah 84010


Affidavit of Trustee

State of Utah            )  
                                  ss.  
County of Davis        )


Frederick Hogan Potts, being first duly sworn, deposes and states:

1. This Affidavit concerns certain real property located in Davis County, state of Utah, more particularly described as follows:  
  
Lot 14, OAKRIDGE MANOR SUBDIVISION PLAT "A", according to the Official Plat thereof as recorded in the Office of the Davis County Recorder, State of Utah.  
  
Tax ID No. 05-052-0014 (shown for informational purposes only)  
the ("Property").
2. This affidavit is given to evidence the death of James R. Card, Trustee of The James R. Card and Norma R. Card Trust, UTAD April 26, 2006 ("Card Trust") and to further evidence that Frederick Hogan Potts is Trustee of the Card Trust.
3. Frederick Hogan Potts hereby certifies that James R. Card listed as Trustee of the Card Trust is one and the same person as James Russell Sr listed as decedent on the Certificate of Death attached hereto Exhibit A, and James R. Card named as a Trustee of the Card Trust, Grantee in the Quit Claim Deed recorded on the title of the Property on May 1, 2006 as Entry No. 2164564 in Book 4024 beginning at Page 73 in the Official Records in the office of the County Recorder of Davis County, State of Utah
4. By virtue of that death certificate attached hereto and recorded as part hereof and pursuant to the Trust Agreement of the Card Trust, Norma R. Card, became the Successor Trustee of the Card Trust.
5. Frederick Hogan Potts further certifies that by that certain instrument dated March 23, 2015 and titled Resignation and Consent to Appoint Frederick Hogan Potts As Trustee of The James R. Card and Norma R. Card Trust, attached hereto as Exhibit B, he was appointed as the sole Trustee of the Card Trust and has full authority to act for and convey any assets of the Card Trust.

Dated this 13 day of September, 2024.

  
Frederick Hogan Potts, Trustee

On this 13 day of SEPTEMBER, 2024, before me, the undersigned Notary Public, personally appeared Frederick Hogan Potts, who is the Trustee of The James R. Card and Norma R. Card Trust, UTAD April 26, 2006, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged before me that he executed the same in his authorized capacity and that by his signature on the instrument he is the person who executed the instrument.

  
\_\_\_\_\_  
Notary Public

My commission expires: 1.4.27

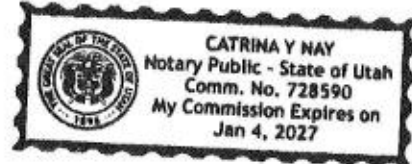


EXHIBIT A

Certificate of Death of James R. Card

## CERTIFICATE OF DEATH

State File Number: 2012001424

3586953  
BK 8584 PG 1088

James Russel Card Sr

## DECEDENT INFORMATION

Date of Death: February 1, 2012  
City of Death: Bountiful  
Age: 77  
Place of Birth: Salt Lake City, Utah  
Armed Services: Yes  
Spouse's Name: Norma Benson  
Industry/Business: Electrical Industry  
Residence: Bountiful, Utah  
Mother's Name: Florence Klenk  
Facility or Address: 1035 Arlington Way

Time of Death: 07:20  
County of Death: Davis  
Date of Birth: April 15, 1934  
Sex: Male  
Marital Status: Married  
Usual Occupation: Master Electrician  
Education: High School or GED  
Father's Name: Alma Percy Card  
Facility Type: Home

## INFORMANT INFORMATION

Name: Norma Card Relationship: Spouse  
Mailing Address: 1035 Arlington Way, Bountiful, Utah 84010

## DISPOSITION INFORMATION

Method of Disposition: Cremation  
Place of Disposition: Lindquist Crematory, Ogden, Utah  
Date of Disposition: February 4, 2012

## FUNERAL HOME INFORMATION

Funeral Home: Lindquist Mortuary - Bountiful  
Address: 727 North 400 East, Bountiful, Utah 84010  
Funeral Director: Barry L Kelly

## MEDICAL CERTIFICATION

Medical Professional: Robert R Mohr MD, Mountainstar Primary Care, 5405 South 500 East Suite 100, Ogden, Utah 84405


## CAUSE OF DEATH

conditions incident to age  
Other significant conditions: dementia  
Tobacco Use: Unknown if User  
Medical Examiner Contacted: Yes Autopsy Performed: No Manner of Death: Natural


Date Issued: February 2, 2012

This is an exact reproduction of the document registered in the State Office of Vital Statistics. Security features of this official document include: Intaglio Border, V & R images in top cycloids, ultra violet fibers and hologram image of the Utah State Seal, over the words "State of Utah". This document displays the date, seal and signature of the State Registrar and the County/District Health Officer.



  
Janice L. Houston, State Registrar  
Office of Vital Statistics



  
Lewis R. Garrett  
Director/Health Officer  
County/District Health Department



# AFFIDAVIT FOR CORRECTION

This is a legal document. Complete in black ink and do not alter.

**ANY CHANGES MADE BELOW VOID THIS CERTIFICATE. A NEW CERTIFICATE MUST BE ISSUED TO VALIDATE CHANGES.**

All vital records are registered as received. Corrections must be made by affidavit. An item on the birth or death certificate may be corrected by affidavit only once; a court order will be required for subsequent corrections.

There is no processing fee for affidavits registered within one year of the date of the event. After one year from the date of the event, there is a fee for filing the affidavit which includes one replacement copy. Affidavits completed **within 90 days of issuance** may be given credit for monies previously paid. (Multiple copies may require an additional fee.)

**PLEASE RETURN ALL COPIES WITH ONE COMPLETED AFFIDAVIT WITHIN 90 DAYS FOR REPLACEMENT TO:  
UTAH DEPARTMENT OF HEALTH, OFFICE OF VITAL RECORDS AND STATISTICS, PO BOX 141012,  
SALT LAKE CITY, UTAH 84114-1012. FOR SAME DAY SERVICE, PLEASE BRING COPIES AND COMPLETED  
AFFIDAVIT TO OUR OFFICE AT 288 NORTH 1460 WEST, SALT LAKE CITY, UTAH.**

## BIRTH CERTIFICATES

- List the facts exactly as stated on the reverse side. Opposite each item, correct the information as it should have been stated at the time of the birth.
- Who may sign the affidavit for corrections: If the person listed on the record is under 18, both parents listed on the record. If the person listed on the record is 18 he/she **must** sign as one of the witnesses, unless mentally incompetent or physically incapacitated. Parents are the preferred witnesses for the second signature. If no father is listed on the record, a relative of the mother may sign if s/he is of legal age. The signatures must be notarized.
- The parent(s) may add or correct the surname from that listed on the record until the child's first birthday without proofs. The first, and/or middle name can be corrected or added without proofs until the child's sixth birthday.
- If the child is under the age of six and there is no father listed on the record, the child's surname may be corrected to match the mother's maiden name without documentation.
- Minor corrections in spelling or parents' information may be corrected anytime. Some corrections may require documentary proof.
- This affidavit cannot be used to add a father to or correct medical information on a birth certificate.

## DEATH CERTIFICATES

- Corrections to non-medical information may be made by the Funeral Home, or the informant **MUST** sign as a witness along with an immediate member of the decedent's family, or a person who is knowledgeable of the facts. Corrections to marital status must be approved and processed by the State Office of Vital Records and Statistics. Contact our office for assistance. Replacements within 90 days may be charged a replacement fee.
- The medical information (Cause of Death) may only be corrected **WITH A MEDICAL AFFIDAVIT COMPLETED** by the certifying health care provider or the Utah Office of the Medical Examiner.

☐ BIRTH ☐ DEATH ☐ STILLBIRTH

LOCAL FILE NUMBER

STATE FILE NUMBER

NAME AS REPORTED ON REVERSE	1a. FIRST NAME	1b. MIDDLE NAME	1c. LAST NAME
STATEMENT OF CORRECTIONS	2a. FACTS EXACTLY AS STATED ON THE ORIGINAL RECORD		2b. CORRECT INFORMATION
WHY IS CHANGE NECESSARY?	3.		
PROOFS USED TO AMEND RECORD	4.		
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 & Sworn to before me this ____ day of ____ 20__
	5. SIGNATURE OF WITNESS		Notary Public
	6. DATE SIGNED		My Commission expires
	7. AGE OF WITNESS	8. DAYTIME TELEPHONE # OF WITNESS	
	9. ADDRESS OF WITNESS (Street, City, State, Zip)		
10. RELATIONSHIP TO PERSON IN 1a: Self Parent/Guardian Spouse Funeral Director Informant Other(Specify)			
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 & Sworn to before me this ____ day of ____ 20__
	11. SIGNATURE OF WITNESS		Notary Public
	12. DATE SIGNED		My Commission expires
	13. AGE OF WITNESS	14. DAYTIME TELEPHONE # OF WITNESS	
	15. ADDRESS OF WITNESS (Street, City, State, Zip)		
16. RELATIONSHIP TO PERSON IN 1a: Self Parent/Guardian Spouse Funeral Director Informant Other(Specify)			

EXHIBIT B

Resignation and Consent to Appoint Frederick Hogan Potts As Trustee of The James R. Card  
and Norma R. Card Trust

RESIGNATION AND CONSENT TO APPOINT FREDERICK HOGAN POTTS AS  
TRUSTEE OF THE JAMES R. AND NORMA R. CARD TRSUT

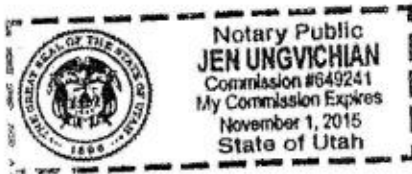
I, Norma R. Card, aka Norma Ruth Card, being of sound mind, state that I am the surviving Trustee of the JAMES R. AND NORMA R. CARD TRUST, U/A/D April 26, 2006 (the "Trust"). Pursuant to Article X of the Trust I hereby resign as Trustee of the Trust and consent to the appointment of Frederick Hogan Potts to act as Trustee of the Trust. I acknowledge that Frederick Hogan Potts is the named successor trustee fo the Trust.

In the event that Frederick Hogan Potts is unable or unwilling to serve as Trustee at any time prior to my death, I will resume as Trustee of the Trust..

DATED this 23 day of March, 2015.

  
NORMA R. CARD

SUBSCRIBED AND SWORN to before me this 23rd day of March, 2015.



  
NOTARY PUBLIC

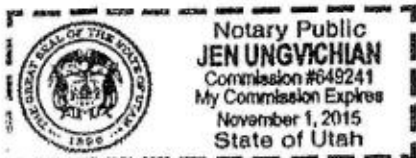
ACCEPTANCE OF APPOINTMENT AS TRUSTEE OF THE  
JAMES R. AND NORMA R. CARD TRSUT

I, Frederick Hogan Potts hereby accept appointment as Trustee of the JAMES R. AND NORMA R. CARD TRUST, U/A/D April 26, 2006 (the "Trust"), and agree to faithfully carry-out all duties of that office and manage the assets of the Trust as directed by the Trust.

DATED this 23rd day of March, 2015.

  
FREDERICK HOGAN POTTS

SUBSCRIBED AND SWORN to before me this 23rd day of March, 2015.



  
NOTARY PUBLIC