

Mail tax statements to:
Judy Riley Hammond, Trustee
627 Edgewood Drive
North Salt Lake, Utah 84054

E 3593254 B 8618 P 783-786
RICHARD T. MAUGHAN
DAVIS COUNTY, UTAH RECORDER
10/31/2024 2:18 PM
FEE 40.00 Pgs: 4
DEP AAM REC'D FOR ROWE
& WALTON PC

When recorded, return to:
Rowe & Walton PC
Robyn Rowe Walton
Attorney at Law
915 South Main
Bountiful, Utah 84010

Serial Nos. 01-356-0008; 01-056-0014

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

JUDY RILEY HAMMOND aka JUDY R. HAMMOND, hereinafter referred to as "Affiant", having been duly sworn, on oath, deposes and says:

1. That 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. That Affiant is the Trustee of THE HAMMOND FAMILY TRUST dated the 18th day of March, 1996, and that up until the date of his death, WILLIAM E. HAMMOND was a Co-Trustee of said trust agreement.
3. That WILLIAM E. HAMMOND aka WILLIAM EVANS HAMMOND died on the 29th day of May, 2024; a certified copy of the death certificate acknowledging his death is attached hereto and by reference made a part hereof.
4. That WILLIAM E. HAMMOND conveyed any and all interest in the below-described property to WILLIAM E. HAMMOND and JUDY R. HAMMOND, Trustees or Successor Trustees of THE HAMMOND FAMILY TRUST, dated March 18, 1996, by a Quit-Claim Deed recorded the 1st day of March, 2007, as Entry No. 2248785, Book 4230, Page 1233, covering the following property situated in Davis County, State of Utah:

ALL OF UNIT 20B, EDGEWOOD ESTATES PHASE 2 PLAT D. A PUD.

5. That WILLIAM E. HAMMOND conveyed any and all interest in the below-described property to WILLIAM E. HAMMOND and JUDY R. HAMMOND, Trustees or Successor Trustees of THE HAMMOND FAMILY TRUST, dated March 18, 1996, by a Quit-Claim Deed recorded the 25th day of April, 2012, as Entry No. 2657477, Book 5508, Pages 564-565, covering the following property situated in Davis County, State of Utah:

BEG S 13^57' E 371.98 FT FR N 1/4 COR OF SEC 1-T1N-R1W, SLM, BEING A PART OF BLK 6, LOT 32, AMD PLAT OF IRFRED PARK SUB; & RUN TH N 89^59' E 150 FT; TH S 0^1 E 107.65 FT TO S LINE OF LOT 32; TH S 89^59' W 213.70 FT TO E'LY R/W LINE OF HWY 89; TH NE'LY ALG SD R/W LINE ON A 14,374 FT RAD CURVE TO THE LEFT, 125 FT TO THE POB. CONT. 0.445 ACRES.

- 6. That WILLIAM EVANS HAMMOND named as the deceased in the certified copy of the death certificate hereto attached, is the same person as WILLIAM E. HAMMOND named in said Deeds above referred to.
- 7. That by reason of the death of WILLIAM E. HAMMOND, and pursuant to Article VIII., of said Trust Agreement, the Affiant, JUDY RILEY HAMMOND aka JUDY R. HAMMOND, has become the Trustee of THE HAMMOND FAMILY TRUST, dated the 18th day of March, 1996.
- 8. That the Affiant does hereby accept the incumbency to serve in said capacity as Trustee of said Trust; that by reason of the death of WILLIAM E. HAMMOND, and the terms of said Trust Agreement, Affiant as Trustee and with the power and authority vested in her by reason of said Trust, 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.
- 9. The Undersigned, as Trustee of THE HAMMOND FAMILY TRUST dated the 18th day of March, 1996, does hereby remove the name of WILLIAM E. HAMMOND, Trustee of THE HAMMOND FAMILY TRUST, dated the March 18, 1996, and said property shall be titled from this date forward as: JUDY RILEY HAMMOND aka JUDY R. HAMMOND, Trustee of THE HAMMOND FAMILY TRUST, dated the 18th day of March, 1996, of North Salt Lake, County of Davis, State of Utah.

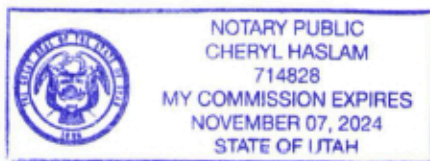
DATED this 29th day of October, 2024.

Judy R. Hammond
 JUDY R. HAMMOND, Trustee
 THE HAMMOND FAMILY TRUST
 dated the 18th day of March, 1996

Judy Riley Hammond
 aka JUDY RILEY HAMMOND

STATE OF UTAH)
 : ss.
 COUNTY OF SALT LAKE)

On this 29th day of October, 2024, personally appeared before me JUDY RILEY HAMMOND aka JUDY R. HAMMOND, Trustee of THE HAMMOND FAMILY TRUST dated the 18th day of March, 1996, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to on this instrument, and acknowledged that she executed the same.



Cheryl Haslam
 NOTARY PUBLIC
 Residing at Salt Lake County

STATE OF UTAH
CERTIFICATION OF VITAL RECORD

3593254
BK 8618 PG 785

CERTIFICATE OF DEATH

State File Number: 2024009230

William Evans Hammond

DECEDENT INFORMATION

Date of Death:	May 29, 2024	Time of Death:	01:33
City of Death:	Bountiful	County of Death:	Davis
Age:	84	Date of Birth:	September 23, 1939
Place of Birth:	Logan, Utah	Sex:	Male
Armed Services:	Yes	Marital Status:	Married
Spouse's Name:	Judy Riley	Usual Occupation:	Business Owner
Industry/Business:	Pawn and Retail Miscellaneous	Education:	Associate Degree
Residence:	North Salt Lake, Utah	Father's Name:	Max Hammond
Mother's Name:	Leona Evans	Facility Type:	Hospital Inpatient
Facility or Address:	Lakeview Hospital		

INFORMANT INFORMATION

Name:	Judy Hammond	Relationship:	Spouse
Mailing Address:	627 Edgewood Drive, North Salt Lake, Utah 84054		

DISPOSITION INFORMATION

Method of Disposition:	Burial
Place of Disposition:	Bountiful City Cemetery, Bountiful, Utah
Date of Disposition:	June 8, 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: Scott E Southworth MD, Bountiful Internal Medicine, 520 East Medical Drive #300, Bountiful, Utah 84010

CAUSE OF DEATH

Atherosclerotic heart disease
Due to (or as a consequence of): Staphylococcal epidural abscess
Tobacco Use: Non-user
Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Registered: May 30, 2024

Date Issued: May 30, 2024

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. Winger, MSW, LCSW
State Registrar



* 0 6 7 3 9 5 0 8 3 *



Brian Hatch
Director/Health Officer



STATE OF UTAH - DEPARTMENT OF HEALTH - 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 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, 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
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 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 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					