



\*W2665095\*

TERMINATION OF JOINT TRUSTEESHIP  
AFFIDAVIT

STATE OF UTAH )

County of Weber )

: ss.

EH 2665095 PG 1 OF 5  
ERNEST D ROWLEY, WEBER COUNTY RECORDER  
20-NOV-13 256 PM FEE \$18.00 DEP TOT  
REC FOR: ROGER BINGHAM

AFFIANT, ROGER M. BINGHAM, being first duly sworn, deposes and says: That he is of legal age and a resident of Salt Lake City, Salt Lake County, Utah. That he is a surviving son of MERLIN LEE BINGHAM, named as a GRANTEE in that certain Warranty Deed dated November 30, 1988, in which MERLIN LEE BINGHAM and ARLENE R. BINGHAM, husband and wife are the named Grantors, and MERLIN LEE BINGHAM and ARLENE R. BINGHAM, as Joint Trustees of the MERLIN M. BINGHAM TRUST dated November, 30, 1988, are the named Grantees, as recorded December 5, 1988, in the office of the Weber County Recorder, State of Utah, as Entry No. 1064794 in Book 1551 at page 2536. The premises particularly described in said Warranty Deed are located in Weber County, Utah, described as:

AN UNDIVIDED ONE-HALF INTEREST IN THE FOLLOWING:  
Land Serial No. 15-075-0009 1/2

DESCRIPTION OF PROPERTY: As Of: 02-JUN-1977 Change Year/Codc: 1977 R/P ACRES: 13.97

PART OF THE NORTHWEST QUARTER OF SECTION 26. TOWNSHIP 6 NORTH. RANGE 2 WEST. SALT LAKE MERIDIAN. U.S. SURVEY. DESCRIBED AS FOLLOWS. TO-WIT: COMMENCING AT A POINT 64 RODS EAST AND 282.5 FEET NORTH OF THE SOUTHWEST CORNER OF SAID QUARTER SECTION. AND RUNNING THENCE NORTHEASTERLY ALONG CANAL TO THE EAST LINE OF THE WEST 1/2 OF SAID QUARTER SECTION. THENCE NORTH 2236 FEET. MORE OR LESS. TO THE NORTH LINE OF SAID QUARTER SECTION. THENCE WEST 16 RODS. MORE OR LESS. TO A POINT DUE NORTH OF THE PLACE OF BEGINNING. THENCE SOUTH 2341 FEET. MORE OR LESS. TO THE PLACE OF BEGINNING.

That said MERLIN LEE BINGHAM, a named Joint Trustee of the MERLIN LEE BINGHAM TRUST, dated November 30, 1988, as referred to above, is one and the same person as the MERLIN LEE BINGHAM named in the attached State of Utah Certificate of Death, State File No. 29-474-05. That said MERLIN LEE BINGHAM Trustee died at West Haven, Utah, on April 18, 2005, and that by reason of his death, said premises thereupon vested in ARLENE R. BINGHAM and ROGER M. BINGHAM, as the named successor Joint Trustees under said described Merlin Lee Bingham Trust.

The said ARLENE R. BINGHAM, a Joint Trustee of the Merlin Lee Bingham Trust, dated November 30, 1988, who is one and the same person as the ARLENE BINGHAM named in the attached State of Utah Certificate of Death, State File No. 2012013489 died at Ogden, Utah, on October 21, 2013, and by reason of her death the above described premises thereupon vested in ROGER M. BINGHAM, as surviving Trustee thereof.

The vesting of title of said premises in ROGER M. BINGHAM as surviving Trustee of said Merlin Lee Bingham Trust, dated November 30, 1988, is pursuant to the provisions of Utah Code Annotated 22-2-1, 1953, as Amended, which specifically provides that upon the death of a Trustee of a Trust, the real property of the trust estate immediately vests in the named surviving Trustee under said Trust Instrument.

AFFIANT FURTHER DECLARES that he is a surviving son of ARLENE

R. BINGHAM, named as a GRANTEE in that certain Warranty Deed dated November 30, 1988, in which MERLIN LEE BINGHAM and ARLENE R. BINGHAM, husband and wife are the named Grantors, and ARLENE R. BINGHAM and MERLIN LEE BINGHAM, as Joint Trustees of the ARLENE R. BINGHAM TRUST dated November, 30, 1988, are the named Grantees, as recorded December 5, 1988, in the office of the Weber County Recorder, State of Utah, as Entry No. 1064795 in Book 1551 at page 2537. The premises particularly described in said Warranty Deed are located in Weber County, Utah, described as:

AN UNDIVIDED ONE-HALF INTEREST IN THE FOLLOWING:  
 Land Serial No. 15-075-0009

DESCRIPTION OF PROPERTY: As Of: 02-JUN-1977 Change Year/Code 1977 R/P ACRES 13.97

PART OF THE NORTHWEST QUARTER OF SECTION 26. TOWNSHIP 6 NORTH, RANGE 2 WEST, SALT LAKE MERIDIAN, U.S. SURVEY, DESCRIBED AS FOLLOWS. TO-WIT: COMMENCING AT A POINT 64 RODS EAST AND 282.5 FEET NORTH OF THE SOUTHWEST CORNER OF SAID QUARTER SECTION, AND RUNNING THENCE NORTHEASTERLY ALONG CANAL TO THE EAST LINE OF THE WEST 1/2 OF SAID QUARTER SECTION, THENCE NORTH 2236 FEET, MORE OR LESS, TO THE NORTH LINE OF SAID QUARTER SECTION, THENCE WEST 16 RODS, MORE OR LESS, TO A POINT DUE NORTH OF THE PLACE OF BEGINNING, THENCE SOUTH 2341 FEET, MORE OR LESS, TO THE PLACE OF BEGINNING.

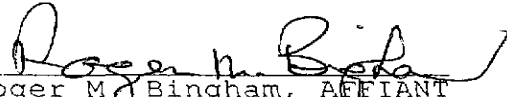
That said MERLIN LEE BINGHAM, a named Joint Trustee of the ARLENE R. BINGHAM TRUST, dated November 30, 1988, as referred to above, is one and the same person as the MERLIN LEE BINGHAM named in the attached State of Utah Certificate of Death, State File No.29-474-05. That said MERLIN LEE BINGHAM Trustee died at West Haven, Utah, on April 18, 2005, and that by reason of his death, said premises thereupon vested in ARLENE R. BINGHAM and ROGER M. BINGHAM, as the named successor Joint Trustees under said described Arlene R. Bingham Trust.

The said ARLENE R. BINGHAM, a Joint Trustee of the Arlene R. Bingham Trust, dated November 30, 1988, who is one and the same person as the ARLENE BINGHAM named in the attached State of Utah Certificate of Death, State File No. 2012013489 died at Ogden, Utah, on October 21, 2013, and by reason of her death the above described premises thereupon vested in ROGER M. BINGHAM, as surviving Trustee thereof.

The vesting of title of said premises in ROGER M. BINGHAM as surviving Trustee of said Arlene R. Bingham Trust, dated November 30, 1988, is pursuant to the provisions of Utah Code Annotated 22-2-1, 1953, as Amended, which specifically provides that upon the death of a Trustee of a Trust, the real property of the trust estate immediately vests in the named surviving Trustee under said Trust Instrument.

The said ROGER M. BINGHAM is now the sole Trustee of the Merlin Lee Bingham Trust dated November 30, 1988, and is the sole Trustee of the Arlene R. Bingham Trust dated November 30, 1988, and each named trust is the owner of an undivided one-half interest in the premises described above herein.

Dated this 20 day of November, 2013, at Ogden, Utah.

  
 Roger M. Bingham, AFFIANT

State of Utah )

SS.

County of Weber )

SUBSCRIBED, SWORN TO, AND ACKNOWLEDGED TO, BY THE AFFIANT, ROGER M. BINGHAM, before me the undersigned Notary Public in and for the State of Utah, this 20 day of November, 2013, at Ogden, Utah.



*Sherril L. Strong*  
Notary Public

STATE OF UTAH  
CERTIFICATION OF VITAL RECORD

EH 2665095  
2005 0031 PG 0

APR 21 2009

STATE OF UTAH - DEPARTMENT OF HEALTH  
CERTIFICATE OF DEATH

LOCAL FILE NUMBER 2947405 STATE FILE NUMBER \_\_\_\_\_

DECEASED'S LEGAL NAME (include AKA's, if any) (Print Middle Last) Merlin Lee BINGHAM 2. SEX Male 3a. DATE OF DEATH (Mo., Day, Yr.) April 18, 2005 3b. TIME OF DEATH 04:00

4. DATE OF BIRTH (Mo., Day, Yr.) August 6, 1923 5. AGE LAST BIRTHDAY (Years) 81 6. IF UNDER 24 HRS. 7. BIRTH PLACE (City & State or Foreign Country) Ogden, Utah 8. SOCIAL SECURITY NUMBER Confidential

9. DEATH OCCURRED IN A HOSPITAL:  1. Inpatient  2. ER/Outpatient  3. DCA  4. DEATH OCCURRED SOMEWHERE OTHER THAN HOSPITAL:  5. Nursing Home/Long Term Care Facility  6. Decedent's Home  7. Other (Specify) \_\_\_\_\_

10. NAME OF HOSPITAL, NURSING HOME OR OTHER FACILITY (if deceased at facility, give name) 11. COUNTY OF DEATH Weber 12. CITY, TOWN OR LOCATION OF DEATH West Haven

13a. MARITAL STATUS  1. Never Married  2. Widowed  3. Married, but separated  4. Married, but cohabiting  5. Other (Specify) \_\_\_\_\_

11. SURVIVING SPOUSE'S NAME (If wife, give name prior to first marriage) Arlene Ritchie

12a. DECEASED'S USUAL OCCUPATION (Give kind of work being most of working life. Do NOT enter retired.) Retail Buyer 12b. KIND OF BUSINESS OR INDUSTRY \_\_\_\_\_ 13a. RESIDENCE - STREET AND NUMBER 2441 West 1800 South

13b. STATE Utah 13c. COUNTY Weber 13d. CITY, TOWN, COMMUNITY, OR RURAL West Haven 13e. ZIP CODE 84401 13f. INSIDE CITY LIMITS?  1. Yes  2. No

14. FATHER'S NAME (First, Middle, Last) Erastus Bingham 15. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last) Hilda Bonnerud

16. NAME, RELATIONSHIP AND MAILING ADDRESS OF INFORMANT (Street & Number, City, State, Zip) Arlene Bingham (wife), 2441 West 1800 South, West Haven, UT, 84401

17. METHOD OF DISPOSITION  1. Entombment  2. Other \_\_\_\_\_ 18a. DATE OF DISPOSITION April 21, 2005 18b. PLACE OF DISPOSITION (name of cemetery, crematory, or other place) Ogden City Cemetery

19. LOCATION OF DISPOSITION - City or Town, State \_\_\_\_\_ 20. FUNERAL HOME (Name and complete address) Myers Mortuary, 845 Washington Blvd, Ogden, Utah 84404

21. SIGNATURE OF FUNERAL SERVICE LICENSEE \_\_\_\_\_

22. CERTIFIER (Check Only one):  1. CERTIFYING PHYSICIAN. To the best of my knowledge, death occurred at the place, date and time, and due to the cause(s) and manner as stated.  2. MEDICAL EXAMINER. On the basis of examination of and/or autopsy of the person, death occurred at the place, date, time and due to the cause(s) and manner as stated.  3. Other (Specify) \_\_\_\_\_

M.E. Case No. \_\_\_\_\_ SIGNATURE & TITLE OF CERTIFIER Justin Mansfield, M.D. U.C. No. 4781735-1205 DATE SIGNED 4/19/05

23a. NAME, ADDRESS AND ZIP CODE FOR PERSON WHO CERTIFIED THE CAUSE OF DEATH (Item 24) (Type/print) Justin Mansfield, M.D., 4401 Harrison Blvd., Ogden, Utah 84403 23b. DATE PREPARED WAS LAST ATTENDED March 23, 2004

24. PART 1. Enter the place of origin, disease, injuries, or complications that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or other events resulting in death. Due to (or as a consequence of) \_\_\_\_\_

24a. IMMEDIATE CAUSE (Final disease or injury) \_\_\_\_\_ 24b. UNDERLYING CAUSE (Primary disease or injury which resulted in death) LAST \_\_\_\_\_

24c. DUE TO (OR AS A CONSEQUENCE OF) \_\_\_\_\_

24d. DUE TO (OR AS A CONSEQUENCE OF) \_\_\_\_\_

24e. DUE TO (OR AS A CONSEQUENCE OF) \_\_\_\_\_

25. PART 2. Other specified conditions contributing to death, but not resulting in the underlying cause given in Part 1. \_\_\_\_\_

25a. WAS AN AUTOPSY PERFORMED?  1. Yes  2. No 25b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH?  1. Yes  2. No

26. IN YOUR OPINION, TOBACCO USE BY THE DECEASED:  1. Probably contributed to the cause of death  2. Did not contribute to the cause of death  3. Did not contribute to the cause of death  4. Unknown

27. MANNER OF DEATH:  1. Natural  2. Accident  3. Suicide  4. Homicide  5. Pending investigation  6. Could not be determined

28. FEMALE:  1. Not pregnant within past year  2. Pregnant 30 days of death  3. Not pregnant, but pregnant 49 days to 1 year before death  4. Not pregnant, but pregnant 3 months to 49 days before death  5. Unknown if pregnant within past year

29a. DATE OF INJURY (Mo., Day, Yr.) \_\_\_\_\_ 29b. TIME OF INJURY \_\_\_\_\_ 29c. INJURY AT WORK?  1. Yes  2. No 29d. PLACE OF INJURY - At home, in factory, office, building, etc. (Specify) \_\_\_\_\_

30. LOCATION (Street or rural route number, city or town, county) 30a. Describe how injury occurred (Enter sequence of events which resulted in injury. NATURE OF INJURY should be stated in Item 24) \_\_\_\_\_

31. WAS DECEASED OF MEXICAN ORIGIN? (Check for "Mexican" if deceased is of Mexican descent.)  1. Yes  2. No

31a. If "Yes," specify race and ethnicity of the decedent:  1. Yes, Mexican, Mexican American, Chicano  2. Yes, Cuban  3. Yes, Puerto Rican  4. Yes, other Spanish/Hispanic origin (Specify) \_\_\_\_\_

31b. DECEASED'S RACE (Check one of three races to indicate either the decedent considered himself or herself to be):  01. White  02. Black or African American  03. American Indian or Alaska Native (Name of the enrolled or principal tribe)  04. Chinese  05. Japanese  06. Native Hawaiian  07. Filipino  08. Other Asian (Specify)  09. Asian Indian  10. Korean  11. Vietnamese  12. Samoan  13. Guamanian or Chamorro  14. Other Pacific Islander (Specify)  15. Unknown  16. Other (Specify)

31c. DECEASED'S EDUCATION (Check the box that best describes the highest degree or level of school completed in the last 12 months):  1. 8th grade or less  2. 9th - 12th grade no diploma  3. High School graduate or GED completed  4. Some college degree, but no degree  5. Associate degree (e.g., AA, AS)  6. Bachelor degree (e.g., BA, BS, BS)  7. Master degree (e.g., MA, MS, MEd, MDiv, MFA, MHA, MPA)  8. Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LL.M., etc.)

32. REGISTRAR'S SIGNATURE Janice L. Houston MPH 85 33. DATE FILED (Mo., Day, Yr.) Apr 20 2005

DATE ISSUED  
NOV 15 2013

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.



Janice L. Houston  
State Registrar  
Rev. 5/19

\* 0 6 4 1 5 1 9 7 1 \*

UTAH DEPARTMENT OF HEALTH  
Office of Vital Records & Statistics  
Salt Lake City, Utah



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

CERTIFICATE OF DEATH

State File Number: 2013013489

Arlene Bingham

DECEDENT INFORMATION

|                      |                            |                   |                              |
|----------------------|----------------------------|-------------------|------------------------------|
| Date of Death:       | October 21, 2013           | Time of Death:    | 05:00                        |
| City of Death:       | Ogden                      | County of Death:  | Weber                        |
| Age:                 | 90                         | Date of Birth:    | October 2, 1923              |
| Place of Birth:      | Ogden, Utah                | Sex:              | Female                       |
| Armed Services:      | No                         | Marital Status:   | Widowed                      |
| Spouse's Name:       |                            | Usual Occupation: | Secretary                    |
| Industry/Business:   | Ogden City School District | Education:        | High School or GED           |
| Residence:           | West Haven, Utah           | Father's Name:    | Laurence Ritchie             |
| Mother's Name:       | Mary Edith Ensign          | Facility Type:    | Nursing Home/Assisted Living |
| Facility or Address: | Legacy House               |                   |                              |

INFORMANT INFORMATION

|                  |  |               |     |
|------------------|--|---------------|-----|
| Name:            | Roger Bingham                                | Relationship: | Son |
| Mailing Address: | 123 2nd Avenue N, Salt Lake City, Utah 84103 |               |     |

DISPOSITION INFORMATION

|                        |                                  |
|------------------------|----------------------------------|
| Method of Disposition: | Burial                           |
| Place of Disposition:  | Ogden City Cemetery, Ogden, Utah |
| Date of Disposition:   | October 24, 2013                 |

FUNERAL HOME INFORMATION

|                   |  |
|-------------------|--|
| Funeral Home:     | Myers Mortuary, Ogden                  |
| Address:          | 845 Washington Blvd, Ogden, Utah 84404 |
| Funeral Director: | Matthew G Myers                        |

MEDICAL CERTIFICATION

|                       |  |
|-----------------------|--|
| Medical Professional: | Steven E Warren MD, PO Box 540552, North Salt Lake, Utah 84054 |
|-----------------------|--|

CAUSE OF DEATH

Dementia Multi-Infarct  
 Due to (or as a consequence of): Cardiovascular Accident  
 Due to (or as a consequence of): Osteoporosis  
 Other significant conditions: Femur Fracture  
 Tobacco Use: Non-user  
 Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Registered: October 25, 2013  
 Date Issued: October 25, 2013

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*  
 Janice L. Houston, State Registrar  
 Office of Vital Statistics



*Gary House*  
 Gary House  
 Director/Health Officer  
 County/District Health Department

