



Mail Tax Statements To:  
Sandra Johnson, Trustee  
406 West 3300 South  
Bountiful, Utah 84010

SPACE ABOVE FOR RECORDER'S USE  
PARCEL ID NUMBER: 05-087-0101

## AFFIDAVIT OF SURVIVING TRUSTEE

Comes now Sandra Johnson the undersigned, being duly sworn, and states as follows:

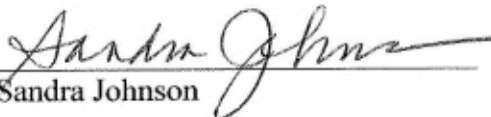
1. Affiant is a Successor Trustee of the D. Bryant Stringham Family Trust dated October 11, 1991, and all amendments and restatements thereto (hereinafter "the Trust"). Affiant is presently eligible to act as sole Trustee of the Trust due to the death of Affiant's mother and father and Initial Trustees, D. Bryant Stringham Jr. and Beverly B. Stringham. This Affidavit is consistent with the Appointment of Successor Trustee provisions located in the Trust.

2. Affiant knows the said D. Bryant Stringham Jr., Trustee, who is named in that particular Utah Certificate of Death, state file number 2023016068, a certified copy of which is attached hereto and incorporated herein, and Beverly B. Stringham, Trustee, who is named in that particular Utah Certificate of Death, state file number 2018007914, a certified copy of which is attached hereto and incorporated herein, to be the same persons who are named as Grantees and as Trustees of the Trust in that particular Quit Claim Deed dated November 16, 1992 and recorded on November 17, 1992 as entry number 1002690, Book 1555, Page 612 in the office of the Davis County Recorder, State of Utah, covering the following described property:

SEE LEGAL DESCRIPTION ON EXHIBIT A, ATTACHED HERETO

3. Affiant hereby requests that the title to the above-described property, upon recording of this document, be transferred to Sandra Johnson, Trustee, or her successors in interest, of the D. Bryant Stringham Family Trust dated October 11, 1991.

Date: 13 day of November, 2023

  
Sandra Johnson

STATE OF UTAH                    )  
  SS  
COUNTY OF UTAH                )

SUBSCRIBED AND SWORN to before me Tage Brandon Nordquist, a notary public, this 13 day of November, 2023, by Sandra Johnson whose identity is personally known to me or proved to me on the basis of satisfactory evidence, and who, being by me duly sworn (or affirmed), did say that she is the Trustee of the D. Bryant Stringham Family Trust under agreement dated October 11, 1991, and that the foregoing instrument was signed by proper authority, in the capacity and for the purposes stated in it.

  
Notary Public



*This instrument has been prepared by Parsons, Behle and Latimer solely from information provided by the client. There are no express or implied guarantees as to marketability of title, accuracy of the property or property legal description or quantity of land described, as no examination of title property was requested by the client.*

Exhibit A

All of Unit 101 as shown in the Record of Survey Map for Ridgewood of Maple Hills Phase IV, appearing in the records of the Davis County Recorder, Farmington, Utah, dated 28 August 1975, recorded 8 September 1975, Entry No. 419066, Book 577, Page 229, and as described in the Declaration of Condominium for RIDGEWOOD OF MAPLE HILLS, appearing as Entry No. 419067, Book 577, Page 230 and following pages of the Official Records of Davis County, as amended by the Amendment to the Map dated 14 June 1976, recorded 18 June 1976, Entry No. 436355, Book 605, Page 921, and as further amended 21 July 1977, Entry No. 467981 Book 660, Page 30 of Official Records, and the First Amendment to Declaration of RIDGEWOOD CONDOMINIUM, dated 17 June 1976, recorded 18 June 1976, as Entry No. 436356, Book 605, Pages 922-929, and the Second Amendment to Declaration of RIDGEWOOD CONDOMINIUM, DATED 14 July 1977, recorded 21 July 1977, Entry No. 467982, Book 660, Pages 36-43 and the Third Amendment to Declaration of RIDGEWOOD CONDOMINIUM, dated 7 July 1978, recorded 25 August 1978, Entry No. 506381, Book 725, Pages 362-366, and the Fourth Amendment to Declaration of RIDGEWOOD CONDOMINIUM, dated 28 December 1978, recorded 29 December 1978, Entry No. 519044, Book 746, Pages 954-960, of the Official Records of Davis County.

TOGETHER with an undivided .9628 percent interest in and to the common areas and facilities as the same are established and identified in the Declaration and Map referred to above, as amended.

TOGETHER with and subject to easements, through said unit, appurtenant to common areas and facilities and all other units, for the support and repair of said unit of the common areas and facilities, and all other units; subject to the provision of the Utah Condominium Ownership Act, the aforesaid Declaration and all rules, regulations and agreement lawfully made or entered into pursuant to the provisions of the aforesaid Act and Declaration as amended, and all easements, conditions and restrictions of record.

*The Grantor(s) and Grantee(s) confirm and agree by their signatures on this document and/or acceptance of this document that the preparer has prepared the instrument only from information given to the preparer by the parties and/or their representatives and has not provided a title search, an examination of title or legal description, or an opinion on title that may arise from the conveyance.*

STATE OF UTAH  
CERTIFICATION OF VITAL RECORD

3552202  
BK 8386 PG 120

CERTIFICATE OF DEATH

State File Number: 2023016068

Dell Bryant Stringham Jr

DECEDENT INFORMATION

Date of Death:	September 29, 2023	Time of Death:	09:25
City of Death:	Bountiful	County of Death:	Davis
Age:	92	Date of Birth:	July 22, 1931
Place of Birth:	Salt Lake City, Utah	Sex:	Male
Armed Services:	No	Marital Status:	Widowed
Spouse's Name:	Beverly Burnett (deceased)	Usual Occupation:	Accountant
Industry/Business:	Aerospace	Education:	Master's Degree
Residence:	Bountiful, Utah	Father's Name:	Doll Briant Stringham Sr
Mother's Name:	Hildegard Schreiner	Facility Type:	Nursing Home/Assisted Living
Facility or Address:	Life Care Center Of Bountiful		

INFORMANT INFORMATION

Name:	Sandra Johnson	Relationship:	Daughter
Mailing Address:	409 West 3300 South, Bountiful, Utah 84010		

DISPOSITION INFORMATION

Method of Disposition:	Burial
Place of Disposition:	Bountiful City Cemetery, Bountiful, Utah
Date of Disposition:	October 7, 2023

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:	Justin W Mansfield MD, Tanner Memorial Clinic, 2121 North 1700 West, Layton, Utah 84041
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CAUSE OF DEATH

Congestive heart failure  
Due to (or as a consequence of): Atherosclerotic Cardiovascular Disease  
Tobacco Use: Non-user  
Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Registered: October 2, 2023

Date Issued: October 2, 2023

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  
Rev 1/20



\* 0 6 7 3 7 7 3 2 \*



Brian Hatch  
Director/Health Officer



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

**AFFIDAVIT TO AMEND A RECORD** 3552202  
BK 8386 PG 121

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: \_\_\_\_\_

<b>INFORMATION AS REPORTED ON RECORD</b>	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)		
<b>STATEMENT OF AMENDMENTS</b>	7. ITEM NO.	8a. FACTS EXACTLY AS ON ORIGINAL RECORD		8b. CORRECT INFORMATION		
<b>WHY IS CHANGE NEEDED?</b>	9. _____					
<b>DOCUMENTS USED</b>	10. _____					
<b>OATH OF FIRST WITNESS (MUST BE 18 OR OLDER)</b>	<b>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.</b>				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		
	12. DATE SIGNED		13. AGE OF WITNESS	14. DAYTIME TELEPHONE		15. RELATIONSHIP TO 1a.
	16. ADDRESS OF WITNESS					
<b>OATH OF SECOND WITNESS (MUST BE 18 OR OLDER)</b>	<b>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.</b>				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		
	18. DATE SIGNED		19. AGE OF WITNESS	20. DAYTIME TELEPHONE		21. RELATIONSHIP TO 1a.
	22. ADDRESS OF WITNESS					

S E A L

STATE OF UTAH  
CERTIFICATION OF VITAL RECORD

355202  
BK 8386 PG 122

CERTIFICATE OF DEATH

State File Number: 2018007914

Beverly Burnett Stringham

DECEDENT INFORMATION

Date of Death:	May 29, 2018	Time of Death:	04:14
City of Death:	Bountiful	County of Death:	Davis
Age:	85	Date of Birth:	May 24, 1933
Place of Birth:	Ogden, Utah	Sex:	Female
Armed Services:	No	Marital Status:	Married
Spouse's Name:	Dell Bryant Stringham	Usual Occupation:	Direct Sales
Industry/Business:	Food Supplements	Education:	Some College but No Degree
Residence:	Bountiful, Utah	Parent or Father:	Harvey Matthew Burnett
Parent or Mother:	Martha Child	Facility Type:	Hospital Inpatient
Facility or Address:	Lakeview Hospital		

INFORMANT INFORMATION

Name:	Bryant Stringham	Relationship:	Husband
Mailing Address:	1914 South Ridgewood Way, Bountiful, Utah 84010		

DISPOSITION INFORMATION

Method of Disposition:	Burial
Place of Disposition:	Bountiful City Cemetery, Bountiful, Utah
Date of Disposition:	June 1, 2018

FUNERAL HOME INFORMATION

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

MEDICAL CERTIFICATION

Medical Professional:	Lisani Estopinan MD, 5505 South 900 East # 240, Murray, Utah 84117
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CAUSE OF DEATH

Acute Hypoxic Respiratory Failure And Shock Suspect Cardiogenic  
Due to (or as a consequence of): Suspect Acute Nstemi And Acute Systolic Congestive Heart Failure  
Due to (or as a consequence of): Acute Metabolic Encephalopathy  
Due to (or as a consequence of): Suspect Acute Myocardial Infarct  
Other significant conditions: Alzheimer's Dementia, Hypermnatremia, Hypertensive Urgency  
Tobacco Use: Non-user  
Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Registered: May 30, 2018

Date Issued: May 30, 2018

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.

  
Richard J. Osborn, MPA  
State Registrar  
Rev. 1/18



065752532

  
Brian Hatch  
Director/Health Officer

**STATE OF UTAH - DEPARTMENT OF HEALTH - OFFICE OF VITAL RECORDS AND STATISTICS**  
**AFFIDAVIT TO AMEND A RECORD**

3552202  
 BK 8386 PG 123

Corrections to a vital record must be made by affidavit but an item on a birth record may be corrected by affidavit only once. A court order is required for subsequent changes. A court order is necessary to make any corrections to a Delayed Birth Certificate. This affidavit cannot be used to correct medical information. Please return any copies of the certificate with this affidavit completed. 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 or hand delivered.

**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

**Affidavit Instructions**

Please print or type in black ink.  
 Items 1-6: Enter the facts as reported on the current vital record.  
 Item 7: Enter 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 on the record.  
 Item 9: Enter the reason the change is necessary.  
 Item 10: Enter the proofs used to support the change, if applicable. The proofs must match the asserted fact(s) exactly.  
 Items 11-22: Enter witness information.

**Witness Instructions**

**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, or a person who is knowledgeable of the facts.

BIRTH

DEATH

STILLBIRTH

STATE FILE NUMBER \_\_\_\_\_

<b>NAME AS REPORTED ON REVERSE</b>	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)		
<b>STATEMENT OF AMENDMENTS</b>	7. ITEM NO.	8a. FACTS EXACTLY AS STATED ON THE ORIGINAL RECORD			8b. CORRECT INFORMATION	
<b>WHY IS CHANGE NECESSARY?</b>	9a.					
	9b.					
<b>DOCUMENTS USED TO AMEND RECORD</b>	10a.					
	10b.					
<b>OATH OF FIRST WITNESS (MUST BE 18 OR OLDER)</b>	<b>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.</b>					Subscribed & Sworn to before me this ____ day of _____, 20 ____
	11a. SIGNATURE OF WITNESS (Must be signed in front of a Notary)			11b. PRINTED NAME OF WITNESS		Notary Signature _____
	12. DATE SIGNED		13. AGE OF WITNESS	14. DAYTIME TELEPHONE OF WITNESS ( )		State _____
	15. RELATIONSHIP OF WITNESS					County _____
	16. ADDRESS OF WITNESS (Street, City, State, Zip)					S E A L
<b>OATH OF SECOND WITNESS (MUST BE 18 OR OLDER)</b>	<b>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.</b>					Subscribed & Sworn to before me this ____ day of _____, 20 ____
	17a. SIGNATURE OF WITNESS (Must be signed in front of a Notary)			17b. PRINTED NAME OF WITNESS		Notary Signature _____
	18. DATE SIGNED		19. AGE OF WITNESS	20. DAYTIME TELEPHONE OF WITNESS ( )		State _____
	21. RELATIONSHIP OF WITNESS					County _____
	22. ADDRESS OF WITNESS (Street, City, State, Zip)					S E A L