

WHEN RECORDED, MAIL TO:
Marilyn Neville
768 N 900 W
West Bountiful, Utah 84087

Parcel No. 12-110-0176

AFFIDAVIT OF SUCCESSOR TRUSTEE

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

We, Marilyn Neville and Nanette N. Mecham, being first duly sworn, say as follows:

1. That on September 9, 1993, Donald Neville and Margery Neville, as Settlers, executed a revocable trust agreement which was referred to as The Donald and Margery Neville Family Living Trust, dated September 9, 1993 (the "Trust"), which named Donald Neville and Margery Neville Co-Trustees.

2. That a First Amendment to the Trust was Executed on March 17, 2010, naming Marilyn Neville and Nanette N. Mecham as Successor Trustees, to serve in the event that neither Donald Neville nor Margery Neville could serve as Trustees.

3. That on November 23, 2009, Margery Neville died, and on September 27, 2022, Donald Neville died. Attached hereto is a certified copy of the death certificate of Margery Neville, and attached hereto is a certified copy of the death certificate of Donald Neville.

4. That Margery Neville, Settlor and Trustee of the above listed Trust is the same person as Margery Marie Neville listed on the death certificate attached hereto.

5. That Donald Neville, Settlor and Trustee of the above listed Trust is the same person as Donald Neville listed on the death certificate attached hereto.

6. That as of the date of this Affidavit, we, Marilyn Neville and Nanette N. Mecham are, pursuant to the terms of the Trust, serving as Co-Trustees of The Donald and Margery Neville Family Living Trust, September 9, 1993, as amended and restated from time to time.

7. That pursuant to the terms of the Trust, the Co-Trustees have authority to manage, transfer, convey, and lease any property or assets held by the Trust, or of which the Trust is the beneficiary of, including, but not limited to real property, bank accounts, brokerage accounts, insurance policies, retirement accounts, minerals, vehicles, or other assets, and to take all other actions which may be taken by Trustees pursuant to the provisions of the Utah Uniform Probate Code.

8. That pursuant to the terms of the Trust, the Trustee has the authority to collect, manage, transfer, convey, real property, including the following real property located in Davis County, Utah:

BEG ON THE W'LY LINE OF A STR WH PT IS S 0°11'01" W 266.51 FT ALG THE SEC LINE & N 89°49'48" W 33.0 FT FR THE E ¼ OF SEC 25-T4N-R2W, SLM; & RUN TH N 89°49'48" W 199.33 FT, PARALLEL WITH THE ¼ SEC LINE, TH S 0°11'01" W PARALLELING THE SEC LINE 238.08 FT, TH S 89°49'48" E PARALLELING THE ¼ SEC LINE 199.33 FT TO THE W'LY LINE OF SD ROAD; TH N 0°11'01" E 238.08 FT ALG THE W'LY LINE OF SD ROAD TO THE POB. CONT. 1.09 ACRES.

9. The information contained in this affidavit is true of my own personal knowledge.

DATED this 11 day of April, 2023.

Marilyn Neville
Marilyn Neville

Nanette N. Mecham
Nanette N. Mecham

(VERIFICATION TO FOLLOW ON NEXT PAGE)

VERIFICATION

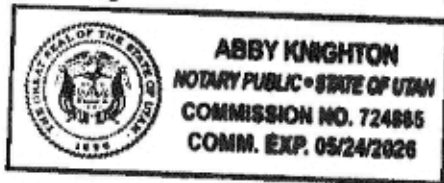
STATE OF UTAH)
 DC Davis (ss.
COUNTY OF SALT LAKE)

The undersigned, being duly sworn, says that the facts set forth in the foregoing Affidavit are accurate and complete to the best of the undersigned's knowledge and belief.

Marilyn Neville
Marilyn Neville

Nanette N. Meham
Nanette N. Meham

On this 11th day of April, 2023, personally appeared before me, Marilyn Neville and Nanette N. Meham, the signers of the foregoing Affidavit, who duly acknowledged to me that they executed the same.



Abby Knighton
NOTARY PUBLIC
Residing at Davis County, 84015

My Commission Expires:
05/24/2026
AffBceTle2200M.2/Nev11le/CS/KPro23

STATE OF UTAH
CERTIFICATION OF VITAL RECORD

3524922
BK 8234 PG 362

CERTIFICATE OF DEATH

State File Number: 2009025692

Margery Marie Neville

DECEDENT INFORMATION

Date of Death:	November 23, 2009	Time of Death:	02:55
City of Death:	Kaysville	County of Death:	Davis
Age:	87	Date of Birth:	July 6, 1922
Place of Birth:	Provo, Utah	Sex:	Female
Armed Services:	No	Marital Status:	Married
Spouse's Name:	Donald Neville	Usual Occupation:	Homemaker
Industry/Business:	Own home	Education:	Bachelor's Degree
Residence:	Kaysville, Utah	Father's Name:	Alfred Lewis Booth
Mother's Name:	Edith Harriett Young	Facility Type:	Home
Facility or Address:	316 South 200 West		

INFORMANT INFORMATION

Name:	Donald Neville	Relationship:	Husband
Mailing Address:	316 South 200 West, Kaysville, Utah 84037		

DISPOSITION INFORMATION

Method of Disposition: Burial
 Place of Disposition: Bountiful City Cemetery, Bountiful, Utah
 Date of Disposition: November 28, 2009

FUNERAL HOME INFORMATION

Funeral Home: Lindquist Mortuary - Kaysville
 Address: 400 North Main Street, Kaysville, Utah 84037
 Funeral Director: Jeffrey S Biddulph

MEDICAL CERTIFICATION

Medical Professional: Charles D White MD, Mountain West Family Medicine, 440 Medical Drive, Bountiful, Utah 84010

CAUSE OF DEATH

Natural causes
 Tobacco Use: Non-user
 Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Issued: November 24, 2009

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.

Barry E Nangle
 Barry E. Nangle, State Registrar
 Office of Vital Statistics



Lewis R. Garrett
 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 DEPT. OF HEALTH, OFFICE OF VITAL RECORDS AND STATISTICS, P O BOX 141012,
SALT LAKE CITY, UT 84114-1012**

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 or other older relatives are preferred witnesses for the second signature. If no father is listed on the record, an older relative of the mother of legal age may sign. 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

- If corrections to non medical information are not being made by the Funeral Home, the Informant **MUST** sign as a witness along with an older relative of the decedent, or another person who is knowledgeable of the facts.
- The medical information (Cause of Death) may only be corrected by the certifying physician or 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	
	2a. FACTS EXACTLY AS STATED ON THE ORIGINAL RECORD				2b. CORRECT INFORMATION	
STATEMENT OF CORRECTIONS						
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					S E A L
	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					S E A L
	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)						

UDOH-OVRS
REV. 02/06

REGISTRARS USE ONLY: Number of Certificates Replaced: ____ Initials: ____ Date: ____

STATE OF UTAH
CERTIFICATION OF VITAL RECORD

3524922
BK 8234 PG 364

CERTIFICATE OF DEATH

State File Number: 2022016857

Donald Neville

DECEDENT INFORMATION

Date of Death:	September 27, 2022	Time of Death:	02:03
City of Death:	Layton	County of Death:	Davis
Age:	94	Date of Birth:	August 22, 1928
Place of Birth:	Layton, Utah	Sex:	Male
Armed Services:	Yes	Marital Status:	Widowed
Spouse's Name:		Usual Occupation:	Computer Programmer
Industry/Business:	Department of Defense	Education:	Bachelor's Degree
Residence:	Kaysville, Utah	Father's Name:	John Edward Neville
Mother's Name:	Octavia Call	Facility Type:	Hospital ER
Facility or Address:	Intermountain Hospital Layton		

INFORMANT INFORMATION

Name:	Nanette Mecham	Relationship:	Daughter
Mailing Address:	998 Bridge Creek Lane, Layton, Utah 84041		

DISPOSITION INFORMATION

Method of Disposition:	Burial
Place of Disposition:	Bountiful City Cemetery, Bountiful, Utah
Date of Disposition:	October 5, 2022

FUNERAL HOME INFORMATION

Funeral Home:	Lindquist Mortuary - Layton
Address:	1867 North Fairfield Road, Layton, Utah 84041
Funeral Director:	Joshua W McMillan

MEDICAL CERTIFICATION

Certifying Physician:	Landon K Preece MD, 435 North Main, Kaysville, Utah 84037
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CAUSE OF DEATH

Intracranial Hemorrhage
Due to (or as a consequence of): Anticoagulated On Warfarin
Due to (or as a consequence of): Sick Sinus Syndrome
Due to (or as a consequence of): Chronic Kidney Disease
Tobacco Use: Non-user
Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Registered: October 3, 2022

Date Issued: October 3, 2022

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 data, seal and signature of the Utah State Registrar of Vital Record and Statistics.


Linda S. Winger, MSW, LCSW
State Registrar



* 0 6 6 8 6 7 6 9 4 *


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		
	12. DATE SIGNED		13. AGE OF WITNESS	14. DAYTIME TELEPHONE		15. RELATIONSHIP TO 1a.
	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		
	18. DATE SIGNED		19. AGE OF WITNESS	20. DAYTIME TELEPHONE		21. RELATIONSHIP TO 1a.
	22. ADDRESS OF WITNESS					

S E A L