ROBERT B. YOUNG, ATTY
802-51ST AVE NO.

A F F I D A V I T

BOOK 6116 PAGE 959

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Comes Joe E. Trotman and Reba Ann Trotman Kent and having been duly sworn state as follows:

1. We, Joe E. Trotman and Reba Ann Trotman Kent, both are citizens and residents of Davidson County, Tennessee and are only living children of Joseph Abbott Trotman and wife, Vera Story Trotman, all of our brothers and sisters having been born dead or having died soon after birth leaving no issue.

2. Joseph Abbott Trotman, our father and Vera Story Trotman, our mother, were husband and wife, neither being previously married nor divorced and as husband and wife owned as real property by the entirety the following described tract:

   A certain tract or parcel of land in Davidson County, State of Tennessee described as follows towit;

   Being lot No. 14 on the plan of A. V. S. Lindsley 29-acre tract of land, as of record in Book No. 57, Page 66, Register's Office for said county.

   Said lot No. 14 fronts 50 feet on the northerly side of Woodland Street, as widened, formerly Chadwell Avenue or Lockeland Avenue and runs back between parallel lines 140 feet to an alley.

   Being the same property conveyed to Joseph Abbott Trotman and wife Vera Story Trotman by deed from Mr. Marion B. Rike and husband James B. Rike as of record in Book 1785, Page ___ R. O. D. C. Tennessee.

3. Joseph Abbot Trotman died of a heart attack on April 4, 1956 at the age of 46. A copy of his certificate of death being attached hereto and incorporated by reference.

4. Vera Story Trotman, having never remarried following the death of Joseph Abbott Trotman, died a widow at the age of 71. A copy of her certificate of death being attached hereto and incorporated by reference.

5. There are no outstanding obligations of either of our parents, all obligations having been paid, and there are no other heirs at law who will inherit from them.

SIGNED at Nashville, Tennessee on the day and date indicated below.

Joe E. Trotman

Reba Ann Trotman Kent

IDENTIFICATION REFERENCE

AUG 16 2 16 PM '83

Z. WILLIAMS, REGISTER
DAVIDSON COUNTY, TN

H 67454

RUSH

STATE OF TENNESSEE
COUNTY OF DAVIDSON

BOOK 6116 PAGE 960

Personally appeared before me, the undersigned, a notary public, the within named Joe E. Trotman, with whom I am personally acquainted and acknowledged that he executed the foregoing for the purposes contained therein.

Sworn to and subscribed before me this 10 day of August 1983 at Nashville, Tennessee.

Robert B Young
Notary Public

My Commission Expires: April 19, 1987.

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Personally appeared before me, the undersigned, a notary public, the within named Reba Ann Trotman Kent, with whom I am personally acquainted and acknowedged that she executed the foregoing for the purposes contained therein.

Sworn to and subscribed before me this 16 day of Aug 1983 at Nashville, Tennessee.

Patricia A Bledsoe
Notary Public

My Commission Expires: 12-28-84

Paula Taylor
STATE REGISTRAR

STATE OF TENNESSEE
DEPARTMENT OF HEALTH AND ENVIRONMENT
CORDELL HULL BUILDING
NASHVILLE, TENNESSEE 37219

AUG 10, 1983

I hereby certify the below to be a true and correct copy of the official document on file in this department. Valid ONLY when embossed seal of the Tennessee Department of Health and Environment and red imprinted signature of the State Registrar are affixed.

Paula Taylor
Paula Taylor
State Registrar

BOOK 6116 PAGE 961

1274
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1904
BIRTH NO.

DEPARTMENT OF PUBLIC HEALTH **CERTIFICATE OF DEATH** DIVISION OF VITAL STATISTICS
STATE OF TENNESSEE

DEATH NO. 56-07417

1. NAME: Joseph (First) Abbott (Middle) Trotman (Last)
2. DATE OF DEATH: Apr 4 1956 (Month Day Year)

3. COLOR OR RACE	4. SEX	5. SINGLE, MARRIED, WIDOWED, DIVORCED (SPECIFY)	6. DATE OF BIRTH (Month Day Year)	7. AGE (IN YEARS LAST BIRTHDAY)	IF UNDER 1 YR. MONTHS	DAYS	IF UNDER 24 HRS. HOURS	MINS.
White	Male	Married	Jun 15 1909	46				

8. PLACE OF DEATH
A. COUNTY: Davidson
B. CIVIL DISTRICT: 1
C. CITY OR TOWN: Nashville
D. LENGTH OF STAY IN THIS PLACE: 21 yrs
E. NAME OF HOSPITAL OR INSTITUTION (If not in Hospital or Institution, Give Street Address or Location): Miller Clinic
F. INSIDE CITY LIMITS? YES [X] NO [ ]

9. USUAL RESIDENCE OF DECEASED (Where Deceased Lived. If Institution, Residence Before Admission)
A. STATE: Tenn.
B. COUNTY: Davidson
C. CIVIL DISTRICT: 1
D. CITY OR TOWN: Nashville
E. INSIDE CITY LIMITS? YES [X] NO [ ]
F. STREET ADDRESS (OR LOCATION): 1505 Woodland St.
G. IS RESIDENCE ON A FARM? YES [ ] NO [X]

10A. USUAL OCCUPATION (Kind of Work Done During Most of Working Life, Even If Retired)	10B. KIND OF BUSINESS OR INDUSTRY	11. SOCIAL SECURITY NUMBER	12. WAS DECEASED EVER IN U.S. ARMED FORCES? (YES, NO, OR UNKNOWN)	IF YES, GIVE WAR OR DATES OF SERVICE
Butcher	H.G.Hill Co.	408-09-8757	Yes	WW2

13. BIRTHPLACE (State or Foreign Country)	14. CITIZEN OF WHAT COUNTRY?	15. NAME OF HUSBAND OR WIFE
Alabama	USA	Vera Story Trotman

16. FATHER'S NAME	17. MOTHER'S MAIDEN NAME	18. INFORMANT	ADDRESS
Joe Brown Trotman	Lillie Tribble	Joe Trotman	324 Normandy Cir. Nashville

MEDICAL CERTIFICATION

19. CAUSE OF DEATH — Enter only one cause per line for (A), (B) (C)

		INTERVAL BETWEEN ONSET AND DEATH
PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (A)	Myocardial Infarction	4201
Conditions, if any, which gave rise to above cause (A); stating the underlying cause last — DUE TO (B)	Coronary Thrombosis	
DUE TO (C)	Coronary Sclerosis	
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RELATED TO TERMINAL DISEASE CONDITION GIVEN IN PART I (A)		20. WAS AUTOPSY PERFORMED? YES [ ] NO [ ]

21A. ACCIDENT SUICIDE HOMICIDE	21B. DESCRIBE HOW INJURY OCCURRED (Enter nature of injury in Part I or Part II of Item 19)	
21C. TIME OF INJURY: HOUR A.M. P.M. MO. DAY YR.	APR 1 3 1956	
21D. INJURY OCCURRED WHILE AT WORK [ ] NOT WHILE AT WORK [ ]	21E. PLACE OF INJURY (In or About Home, Farm, Factory, Street, Office Building, etc.)	21F. PLACE OF INJURY CITY, TOWN OR RURAL COUNTY STATE

22. I HEREBY CERTIFY THAT THE DECEASED DIED ON THE DATE AND FROM THE CAUSE STATED ABOVE
SIGNATURE: [signature] M.D. [X] D.O. [ ] OTHER (SPECIFY)
ADDRESS: 605 Gallatin Rd. Nashville
DATE: 4-11-56

23A. BURIAL, CREMATION, REMOVAL (SPECIFY)	23B. DATE OF BURIAL, CREMATION, OR REMOVAL	23C. NAME OF Cemetery or Crematory	23D. LOCATION CITY, TOWN OR COUNTY	STATE
Burial	Apr 6 1956	Spring Hill	Madison	Tenn.

24. FUNERAL DIRECTOR ADDRESS	25. REGISTRATION DIST. NO.	26. DATE SIGNED BY LOCAL REG.	27. REGISTRAR'S SIGNATURE
Eastland Funeral Home, Nashville	2.1901	4-11-56	[signature]

STATE OF TENNESSEE
DEPARTMENT OF HEALTH AND ENVIRONMENT
CORDELL HULL BUILDING
NASHVILLE, TENNESSEE 37219

I hereby certify the below to be a true and correct copy of the official document on file in this department. Valid ONLY when embossed seal of the Tennessee Department of Health and Environment and red imprinted signature of the State Registrar are affixed.

Paula Taylor
Paula Taylor
State Registrar

AUG 10, 1983

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CERTIFICATE OF DEATH

TENNESSEE DEPARTMENT OF PUBLIC HEALTH
VITAL RECORDS

BIRTH NO. _____ STATE FILE NO. 81 035478

1. DECEASED—NAME (First, Middle, Last)			2. DATE OF DEATH (Month, Day, Year)
Vera	Story	Trotman	November 5, 1981

3a. AGE—Last Birthday (Years)	3b. Under 1 Year: Mos. / Days	3c. Under 1 Day: Hours / Min.	4. DATE OF BIRTH (Month, Day, Year)	5. RACE (White, Black, American Indian, Etc.—Specify)	6. SEX
71			May 30, 1910	white	female

7a. COUNTY OF DEATH	7b. CITY, TOWN OR LOCATION	7c. INSIDE CITY LIMITS (Specify Yes or No)	7d. HOSPITAL OR OTHER INSTITUTION—NAME (If not in either, specify Private Residence, Business, Street, Etc.)	7e. If Hosp. or Inst.: Inpatient, Emergency, Dead on Arrival, Other (Specify)
Davidson	Nashville, Tennessee	yes	Edgefield Hospital	In Patient

8. STATE OF BIRTH (If not in U.S.A., Name Country)	9. CITIZEN OF WHAT COUNTRY	10. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)	11. SURVIVING SPOUSE (If wife, give maiden name)
Alabama	U.S.A.	widowed	

12a. SOCIAL SECURITY NUMBER	12b. SERVICE IN ARMED FORCES (Specify War or Dates of Service)	13a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired)	13b. KIND OF BUSINESS OR INDUSTRY
[redacted]-6413	no	Revenue Dept.	State of Tennessee

14a. RESIDENCE—STATE	14b. COUNTY	14c. CITY, TOWN, OR LOCATION	14d. STREET AND NUMBER	14e. Inside City Limits (Specify Yes or No)	14f. CENSUS TRACT NO.
Tennessee	Davidson	Nashville	1505 Woodland	yes	

15. FATHER—NAME	16. MOTHER—MAIDEN NAME	17. INFORMANT—NAME	MAILING ADDRESS
Claude Story	Emma Pryor	Joe E. Trotman	1505 Woodland St.

18a. BURIAL, CREMATION, REMOVAL, OTHER (Specify)	18b. DATE (Month, Day, Year)	18c. CEMETERY OR CREMATORY—NAME	18d. LOCATION (City or Town, State)
Burial	11-7-81	Spring Hill	Madison, Tennessee

19a. FUNERAL DIRECTOR (Signature)	19b. LICENSE NO.	EMBALMER (Signature)	19d. LICENSE NO.
Charles E Woodall	2480	Herman Lipscomb	1176

20. FUNERAL HOME—NAME AND ADDRESS (Street or R.F.D. No., City or Town, State, Zip)	REGISTRAR—SIGNATURE	21b. DATE RECEIVED BY LOCAL REGISTRAR
Roesch Patton Dorris & Charlton Nash, Tn	Marquita M Thompson	11/23/81

22a. PHYSICIAN—I certify that the death occurred at the place, on the date, and due to the cause(s) stated.	Signature	Degree	22b. DATE SIGNED (Month, Day, Year)
		MD	11/20/81

23a. MEDICAL EXAMINER—On the basis of the examination of the body and/or the investigation, death occurred on the date and due to the cause(s) stated	Signature	Title	23b. DATE SIGNED (Month, Day, Year)

24a. CERTIFIER—NAME (Type or Print)	24b. MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)
Glenn S. Gollobin, M. D.	Nashville, Tennessee

25. PART I. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)

		Interval Between Onset and Death
IMMEDIATE CAUSE (a)	Septic shock	Hrs. Min.
DUE TO, OR AS A CONSEQUENCE OF (b)	Gram negative rod/peritonitis	1 day
DUE TO, OR AS A CONSEQUENCE OF (c)	Perforated diverticulum	2 days

CONDITIONS IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)

Osteoporosis C.V.S. | 26. AUTOPSY (Yes or No): No

27a. ACCIDENT, SUICIDE, HOMICIDE OR UNDETERMINED (Specify)	27b. DATE OF INJURY (Month, Day, Year)	27c. HOUR	27d. DESCRIBE HOW INJURY OCCURRED

27e. INJURY AT WORK (Specify Yes or No)	27f. PLACE OF INJURY (At home, farm, street, factory, office bldg., etc.—Specify)	27g. LOCATION (Street or R.F.D. No., City or Town, State)

6116 963

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785

4399 50

WARRANTY DEED — Form 1000 — Published by Tennessee Title Company

For and in consideration of the sum of $ 10.00

Ten and No/100ths ---------- DOLLARS

cash in hand paid by Joseph Abbott Trotman and wife, Vera Story Trotman, and other good and valuable considerations, the receipt of all of which is hereby acknowledged, we, Mrs. Marion B. Rike and husband, James B. Rike

[redacted]

have bargained and sold, and by these presents do transfer and convey unto the said Joseph Abbott Trotman and wife, Vera Story Trotman their heirs and assigns, a certain tract or parcel of land in Davidson County, State of Tennessee, described as follows to wit:

Being Lot No. 14 on the plan of the A. V. S. Lindsley 29-acre tract of land, as of record in book No. 57, page 66, Register's Office for said County.

Said Lot No. 14 fronts 80 feet on the northerly side of Woodland Street, as widened, formerly Chadwell Avenue or Lockeland Avenue, and runs back between parallel lines 140 feet to an alley.

Said property is vested in Mrs. Marion B. Rike by descent from Bettie B. Barnes, deceased.

To have and to hold the said tract or parcel of land, with the appurtenances, estate, title and interest thereto belonging to the said Joseph Abbott Trotman and wife, Vera Story Trotman their heirs and assigns, forever.

And we do covenant with the said Joseph Abbott Trotman and wife, Vera Story Trotman that we are lawfully seized and possessed of said land in fee simple; have a good right to convey it, and the same is unencumbered, except for all 1950 taxes which vendees assume.

And we, Mrs. Marion B. Rike and husband, James B. Rike do further covenant and bind ourselves, our heirs and representatives, to warrant and forever defend the title to the said land to the said Joseph Abbott Trotman and wife, Vera Story Trotman their heirs and assigns against the lawful claims of all persons, whomsoever.

Witness our hands this 4th day of December January 1950

Mrs. Marion B. Rike

James B. Rike

STATE OF TENNESSEE
Hamilton County

Personally appeared before me, Eleanor R. Sandlin Notary Public in and for said County and State the within named Mrs. Marion B. Rike and husband, James B. Rike

the bargainors with whom I am personally acquainted, and who acknowledged that they executed the within instrument for the purposes therein contained. Witness my hand and official seal at Chattanooga, Tennessee this 11th day of January 1950

Commission expires October 1, 1952

Eleanor R. Sandlin
Notary Public

RECORDERS MEMO
LEGIBILITY OF WRITING, TYPING OR PRINTING IN THIS DOCUMENT UNSATISFACTORY WHEN RECEIVED

BOOK 616 PAGE 964

BK 1785

OFFICIAL RECORD

STATE OF TENNESSEE
Davidson County

Personally appeared before me, _____, a Notary Public in and for said County and State, the within named _____

the bargainer, with whom I am personally acquainted, and who acknowledged that executed the within instrument for the purposes therein contained. Witness my hand and official seal at _____, Tennessee, this _____ day of _____ 194__.

Commission expires _____ Notary Public

STATE OF TENNESSEE
Davidson County

Before me, _____, a Notary Public within and for the State and County aforesaid, personally appeared _____ and _____ with whom I am personally acquainted and who upon (his oath; their several oaths) acknowledged (himself; themselves) to be the _____ and _____ respectively of the within named bargainer, a corporation, and that (he; they) as such _____ and _____, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing the name of the corporation by the said _____ as such _____, and attesting the same by the said _____ as such _____.

Witness my hand and official seal at office at _____ on this the _____ day of _____, 194__.

My commission expires _____ Notary Public

88148

WARRANTY DEED

FROM

MRS. MARION B. RICE AND HUSBAND

TO

JOSEPH ABBOTT BRYMAN, JR. UX

REGISTER'S OFFICE
STATE OF TENNESSEE
DAVIDSON COUNTY
Received for record this 18 day of JAN 1950 at 8:30 A.M.
Recording Fee $1.00
FELIX ZOLLICOFFER, JR., Dep. Reg.
BY

Published by
TENNESSEE TITLE COMPANY
NASHVILLE, TENNESSEE
Home Office
LAWYERS TITLE INSURANCE CORPORATION
of Richmond, Virginia

ROSS T. DUNN, ATTY.

STATE TAX $ 1.95
PROBATE $ 6.24
TOTAL 1.50
Rec 1.30
9.19

JAN 18 1950
JNO. B. COBB
County Court Clerk
DAVIDSON COUNTY, TENN.

RECORDERS MEMO
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