63906

IDENTIFICATION REFERENCE

Dec 26 12 24 AM '85

FELIX Z. WILSON II REGISTER
DAVIDSON COUNTY TN

4921-85

LAST WILL AND TESTAMENT

- of -

FRANCYS DONNER

BOOK 6745 PAGE 550

I, FRANCYS DONNER, presently residing in the County of Queens, City and State of New York, being of sound and disposing mind and memory, do hereby make, publish and declare this to be my Last Will and Testament, hereby revoking any and all Wills and Codicils heretofore made by me.

FIRST: I direct my Executor, or Alternate Executor, hereinafter named, to pay, out of my Estate, all of my just debts, including the expenses of my last illness, administrative expenses and funeral expenses as soon after my death as is practicable.

SECOND: I hereby direct that all estate, legacy, transfer, succession and inheritance taxes, federal, state and other, which may be payable by reason of my death, whether in respect of property passing under this Will or in respect of property not passing under this Will, shall be paid out of my residuary Estate.

THIRD: I give, devise and bequeath all the rest, residue and remainder of my property both real and personal, of whatsoever kind and nature and wheresoever situate, of which I may die seized or possessed or to which I shall be entitled, or over which I shall have any power of testamentary disposition or appointment, to my husband, DAVID W. DONNER, if he survives me.

FOURTH: If my husband, DAVID W. DONNER, shall predecease me, then and in that event, I give, devise and bequeath all of my property, both real and personal, of whatsoever kind and nature and wheresoever situate, of which I may die seized or possessed or to which I shall be entitled or over which I shall have any power of testamentary disposition or appointment, as follows:

(a) TEN THOUSAND ($10,000.00) DOLLARS to my friend, JEAN STRACCIA, on condition, however, that she agree to provide a suitable home for my dog, "JULIETTE", or such other pet as I may own on the date of my death, and maintain her (or such other pet) in the same manner and at the same level of comfort which I have done during my lifetime. In the event my friend, JEAN STRACCIA, refuses to care for my dog, "JULIETTE", or such other pet as I may own at the time of my death, in the manner prescribed, this bequest shall lapse and be distributed as a part of my residuary Estate.

(b) My real property located at 1814, 1816 and 1818 21st Avenue South, Nashville, Tennessee, to my friend, KEITH KRAFT.

(c) All the rest, residue and remainder of my property, both real and personal, of whatsoever kind and nature, and wheresoever situate, of which I may die seized or possessed or to which I shall be entitled, or over which I shall have any power of testamentary disposition or appointment, to the following named organizations and institutions in the following percentages:

1. TEN PERCENT (10%) to North Shore Animal League, 22 South Street, Port Washington, New York;

2. TEN PERCENT (10%) to American Society for the Prevention of Cruelty to Animals, 441 E. 92nd Street, New York, N. Y.;

3. TEN PERCENT (10%) to Jewish National Fund, Inc., 42 E. 69 Street, New York, N. Y.;

4. TEN PERCENT (10% to United Jewish Appeal of Greater New York, Inc., 130 E. 59 Street, New York, N. Y.;

5. TEN PERCENT (10%) to Cancer Care, Inc., 1 Park Avenue, New York, N. Y.;

6. TEN PERCENT (10%) to American Heart Association, Inc., 205 E. 42nd Street, New York, N. Y.;

7. TEN PERCENT (10%) to Booth Memorial Medical Center, 56-45 Main Street, Flushing, New York

8. TEN PERCENT (10%) to Fund for Aging Services, Inc., City Meals-on-Wheels, 280 Broadway, New York, N. Y.;

BOOK 6745 PAGE 552

9. TWENTY PERCENT (20%) to St. Francis Hospital Roslyn, New York, Port Washington Blvd., Roslyn, New York.

FIFTH: If my husband, DAVID W. DONNER, shall die simultaneously with me or under such circumstances as to render it difficult or impossible to determine who predeceased the other, I shall be deemed to have survived my hosband, and this Will and all of its provisions shall be construed upon that assumption and basis.

SIXTH: I nominate, constitute and appoint as Executor of this, my Last Will and Testament, my husband, DAVID W. DONNER, and direct that he shall not be required to furnish a bond or other security for the faithful performance of his duties in any jurisdiction, any provision of law to the contrary notwithstanding.

In the event that my Executor shall predecease me or shall fail to qualify, die, resign, or cease to act for any reason as Executor, I nominate, constitute and

appoint as Alternate Executor of this my Last Will and Testament, my friend, KEITH KRAFT, and direct that he shall not be required to furnish a bond or other security for the faithful performance of his duties in any jurisdiction, any provision of law to the contrary notwithstanding.

In the event that both my Executor and Alternate Executor shall predecease me or fail to qualify, die, resign, or cease to act for any reason as Executor and Alternate Executor, I nominate, constitute and appoint as Second Alternate Executor, my Attorney, BARRY M. GOLDSTEIN.

SEVENTH: In addition to, and not in limitation of the powers and discretions conferred by law, I give and grant to my Executor, and Alternate Executor, the following powers and discretions:

(a) To retain, for such period as they may deem advisable or expedient, any investment made or property held by me, of whatsoever nature, at the time of my death, and I direct that they shall not be held liable for any loss resulting to my Estate by reason of the retention of any such investment or property, or for any error of judgment in this respect;

(b) To sell, exchange or otherwise dispose of all or any part of the property, of whatsoever kind and nature and wheresoever situate, constituting a part of my Estate or at any time held hereunder, at such times, upon such terms, for cash or on credit, with or without security, at such prices, in such manner, and at public or private sale, as to them shall seem advisable and proper, and to execute good and sufficient deeds and bills of sale therefor; and to abandon any property, if such abandonment shall be deemed by them to be advisable;

(c) To lease, partition, alter, improve or otherwise deal with, any real property or interest therein constitut-

ing a part of my Estate or at any time held hereunder;

(d) To enforce, extend, modify or waive the terms of any bonds, mortgages or other obligations or liens held hereunder;

(e) To enter upon such contracts and agreements, and to make such compromises or settlements of debts, claims or controversies as they may deem necessary or advisable;

(f) To vote personally, or by proxy, general or limited, any shares of stock or other voting securities which may at any time be held hereunder, and similarly to exercise by attorney any other rights, appurtenant to any property at any time held hereunder;

BOOK 6745 PAGE 554

(g) To consent to or otherwise participate in any reorganization, consolidation, merger, liquidation or adjustment of or other change in any corporation, company or association, or to consent to or participate in any sale, exchange, mortgage, pledge, lease or other disposition of property thereof, or of any part thereof, if any of the property held hereunder is in any way affected; and in connection therewith to exercise options and subscription rights, deposit securities, enter into voting trusts, make agreements, and do any other acts and exercise any other powers that might be legally done or exercised by any person owning such property in his own right; and to pay expenses, assessments and any other amounts deemed necessary or advisable in connection therewith;

(h) In case it shall become necessary or proper to divide all or any part of my Estate into parts or shares, to make distribution in their sole discretion, in money, in kind, or partly in money and partly in kind.

SEVENTH: I declare that this, my Last Will and

testament, and every part thereof, is made with reference to the present existing laws and statutes of the State of New York, and I direct that it be construed in accordance therewith.

BOOK 6745 PAGE 555

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 1st day of March, in the year Nineteen Hundred and Eighty-Five, in the County of Queens, State of New York, in the presence of each and all of the subscribing witnesses, each of whom I have requested, in the presence of the others, to subscribe his name and address, written opposite thereto, as an attesting witness, in my presence, and in the presence of the others.

Francys Donner (L.S.)

Thelma Goldstein

Ralph Goldstein

The foregoing instrument, consistin of seven (7) pages, including the following page, was subscribed, sealed, published and declared by FRANCYS DONNER, the Testatrix above-named, as and for her Last Will and Testament in our presence, and in the presence of each of us, and we, at the same time, at her request

and in her presence, and in the presence of each other, hereunto subscribe our names and residences as attesting witnesses, this 1st day of March, Nineteen Hundred and Eighty-Five; and

We do hereby jointly and severally further certify that the -oregoing attestation clause was read aloud in the presence of the said FRANCYS DONNER, in our presence and in the presence of each of us.

BOOK 6745 PAGE 556

Thelma Andersen Residing at 61-20 Grand Central Pkwy Forest Hills, N.Y. 11375

Ralph Soloroff Residing at 61-20 Grand Cen. Pkwy Forest Hills, NY 11375

Residing at

STATE OF NEW YORK)
COUNTY OF QUEENS) S.S.:

I, PATRICIA F. GILMARTIN, Clerk of the Surrogate's Court in and for the County of Queens, do hereby certify that I have compared the foregoing with the original Will in the above entitled matter, now remaining in this office, and have found the same to be a correct transcript therefrom, and is the whole of such original record.

In Testimony Whereof, I have hereunto set my hand and affixed the Seal of said Surrogate's Court, this 6 day of June 1985

Clerk of the Surrogate's Court

CITY OF NEW YORK BUREAU OF VITAL RECORDS DEPARTMENT OF HEALTH

Date SEP 12 1985

DATE FILED 85 SEP 10 P11 : 57

CERTIFICATE OF DEATH

Certificate No. 156-85-313985

1. NAME OF DECEASED (Type or Print) FRANCIS (First Name) DONNER (Middle Name) (Last Name)

MEDICAL CERTIFICATE OF DEATH (To be filled in by the Physician)

2 PLACE OF DEATH — a. BOROUGH: NEW YORK CITY BROOKLYN
b. Name of hospital or institution (If not hospital, street address): HEBREW HOME & HOSPITAL MEDICAL CENTER LINDEN BOULEVARD AT BROOKDALE PLAZA BROOKLYN, NEW YORK 11212
c. If in hospital (Check): 1 ☐ DOA 2 ☐ Emerg. Rm. 3 ☐ Outpatient ☑ Inpatient
d. If inpatient, date of current admission: Month 09 Day 02 Year 85

3a. DATE AND HOUR OF DEATH (Month)	(Day)	(Year)	3b. HOUR		4. SEX	5. APPROXIMATE AGE
09	10	85	10 46	☑ AM ☐ PM	FEMALE	66

BOOK 6745 PAGE 557

6. I HEREBY CERTIFY THAT: (Check One)
☐ I attended the deceased. ☑ A staff physician of this institution attended the deceased.
☐ Dr. _____ attended the deceased.
from 09-02 19 85 to 09-10 19 85 and last saw h ALIVE at 10 AM
on 09-10 19 85 I further certify that traumatic injury or poisoning DID NOT play any part in causing death, and that death did not occur in any unusual manner and was due entirely to NATURAL CAUSES.
*See first instruction on reverse of certificates.
Witness my hand this 10 day of SEPTEMBER 19 85 Signature _____ D.O. M.D.
Name of Physician FRANCIS PACE (Type or Print) Address HEBREW HOME & HOSPITAL MEDICAL CENTER LINDEN BOULEVARD AT BROOKDALE PLAZA BROOKLYN, NEW YORK 11212

PERSONAL PARTICULARS (To be filled in by Funeral Director)

7. USUAL RESIDENCE a. STATE	b. COUNTY	c. CITY TOWN OR LOCATION	d. STREET AND HOUSE NUMBER	e. INSIDE CITY LIMITS OF 7c
NEW YORK	QUEENS	FOREST HILLS	72-76 YELLOWSTONE BLVD	☑ YES ☐ NO

8. MARITAL STATUS (Check one)	9. CITIZEN OF WHAT COUNTRY	10. NAME OF SURVIVING SPOUSE (If wife, give maiden name)
1 ☐ Never Married 2 ☒ Married or Separated 3 ☐ Widowed 4 ☐ Divorced	U.S.A.	DAVID

11. DATE OF BIRTH OF DECEDENT (Month)	(Day)	(Year)	12. AGE AT LAST BIRTHDAY	If UNDER 1 Year: Months	Days	If LESS than 1 DAY: Hours	Min.
2	13	1919	66				

13. USUAL OCCUPATION (Kind of work done during most of working lifetime; do not enter retired.)	b. KIND OF BUSINESS	14. SOCIAL SECURITY NO.
HOUSEWIFE	OWN HOME	882-14-7644

15. BIRTHPLACE (State or Foreign Country)	16. OTHER NAME(S) BY WHICH DECEDENT WAS KNOWN
ALABAMA	

17. NAME OF FATHER OF DECEDENT	18. MAIDEN NAME OF MOTHER OF DECEDENT
SOLOMON ARBIT	ETTA BERNSTEIN

19a. NAME OF INFORMANT	b. RELATIONSHIP TO DECEASED	c. ADDRESS (City) (State)
DAVID DONNER	HUSBAND	72-76 YELLOWSTONE BLVD. FOREST HILLS N.Y.

20a. NAME OF CEMETERY ~~OR CREMATORY~~	b. LOCATION (City, Town, State and Country)	c. DATE OF BURIAL ~~OR CREMATION~~
CEDAR PARK	PARAMUS N.J.	9-11-85

21a. FUNERAL DIRECTOR: PARKSIDE MEMORIAL CHAPELS, INC. b. ADDRESS: 98-60 Queens Blvd., Forest Hills, N. Y. 11374

BUREAU OF VITAL RECORDS DEPARTMENT OF HEALTH THE CITY OF NEW YORK

This is to certify that the foregoing is a true copy of a record in my custody.

CITY REGISTRAR

The Department of Health does not certify to the truth of the statements made thereon, as no inquiry as to the facts has been provided by law.

DO NOT ACCEPT THIS TRANSCRIPT UNLESS THE RAISED SEAL OF THE DEPARTMENT OF HEALTH IS AFFIXED THEREON. REPRODUCTION OR ALTERATIONS ARE PROHIBITED BY LAW.