Box 23

THIS INSTRUMENT WAS PREPARED BY

Tom G. Coleman, Jr., Atty., 9000 E. Church St., Brentwood, TN

Address New Owner	Send Tax Bills To	Map/Parcel
Mildred T. Harper 2713 Druid Drive Nashville, TN	Same	6DA-34081

BOOK 6998 PAGE 142

AFFIDAVIT OF HEIRSHIP

(Executed pursuant to T.C.A., Section 30-2-712 et.seq.)

FROM: O. B. Harper

TO: Mildred T. Harper

RE: Land in the 6th, formerly the 9th, Civil District of said County, being Lot No. 1 on the Plan of A. S. Johnson's Subdivision, not of record, described according to a survey made by Yokley and Waggoner, Engineers, May 15, 1951, as follows:

BEGINNING on the northerly margin of Druid Drive at the corner of Lots Nos. 1 and 2; being 153.31 feet west of the southwest corner of Lot No. 31 on the Plan of Hidden Acres, as of record in Book 1130, page 89, Register's Office for said County; thence with said Drive, westwardly 46.88 feet to the northwest corner of said Drive; thence leaving said Drive, but continuing westwardly 77.61 feet in all 124.49 feet; thence north 1 degree 42' east 200 feet; thence north 87 degrees 47' east 104 feet to the corner of Lots Nos. 1 and 2, being 173 feet west of the westerly line of Lot No. 29 on the Plan of Hidden Acres; thence with the line between Lots Nos. 1 and 2 southwardly 195 feet to the beginning.

Being the same property conveyed to O. B. Harper and wife, Mildred T. Harper, by deed from S. A. Huddleston and wife, Eva P. Huddleston, of record in Book 4677, page 488, Register's Office for Davidson County, Tennessee.

This conveyance is made subject to easement for right-of-way of water line across southerly part of premises as set out in Book 1913, page 369, said Register's Office and easements for public utilities and 30-foot building setback line, as shown on survey made by Yokley and Waggoner, Engineers, May 15, 1951.

RE: Personal Property of the estate of O. B. Harper, deceased.

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Affiant, being first duly sworn according to law, deposes and states:

1. That O. B. Harper died on April 21, 1986, in Davidson County, Tennessee, and a copy of his death certificate is filed as Exhibit "A" to this Affidavit.

2. That O. B. Harper was survived by his wife, Mildred T. Harper. They were married in 1939.

3. That O. B. Harper left a paper writing of testamentary character purporting to be his Last Will and Testament, a machine copy of which is attached hereto and marked Exhibit "B". His wife, Mildred T. Harper was the sole beneficiary under the Will. A copy of the paid funeral bill is filed as Exhibit "C".

4. That the estate of O. B. Harper is solvent, there being sufficient assets from which all debts, taxes and expenses have been or will be paid.

5. That the personal assets of the decedent were (a) held as tenants by the entirety or (b) are exempt by statute to the widow or (c) subject to disposition by will, the latter category being of such value that the expenses of probate and the formal administration of the estate of the said decedent would not be justified.

6. That the real estate passes to the widow, Mildred T. Harper, as the surviving tenanty by the entirety.

7. That there are no unpaid debts nor taxes due upon the estate of the said decedent. A copy of the Non-Taxable Certificate of the Tennessee Department of Revenue is attached hereto and marked Exhibit "D".

That one of the declared purposes of this instrument is to give effect to said will without the expenses of probate and a formal administration.

Witness my hand this 24th day of September, 1986.

Mildred T. Harper
MILDRED T. HARPER

Sworn to and subscribed before me,
this 24th day of September, 1986.

Carolyn Sizemore
NOTARY PUBLIC

My commission expires: 9-11-88

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Personally appeared before me, the undersigned, a Notary Public in and for said County and State, the within named Mildred T. Harper, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged that she executed the within instrument for the purposes therein contained.

Witness my hand and official seal at Nashville, Tennessee, this 24th day of September.

Carolyn Sizemore
NOTARY PUBLIC

My commission expires: 9-11-88.

4885 7.

IDENTIFICATION REFERENCE

OCT 2 2 49 PM '86

FELIX Z. WILSON II REGISTER
DAVIDSON COUNTY, TN

(A)

BOOK 6998 PAGE 144

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

Paula Taylor
STATE REGISTRAR

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

MAY 9, 1986

Paula Taylor
Paula Taylor
State Registrar

8391824

19074
21
1907

BIRTH NO.

CERTIFICATE OF DEATH

TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT
VITAL RECORDS

STATE FILE NO.

ECOMES A LEGAL WHEN PROPERLY EXE- ND FILED.

PRINT IN ENT BLACK INK.

DECEASED

ESIDENCE WHERE DE- LIVED. IF DEATH OC- IN INSTITUTION, GIVE CE BEFORE ADMIS-

PARENTS AND INFORMANT

REQUIRED PRIOR TO RTATION OF BODY BY N CARRIER OR RE- ROM STATE.

DISPOSITION

CERTIFIER

H NOT ATTENDED BY AN, AUTHORIZED OF- SIGN HERE. ANY AN OR MEDICAL EX- EXECUTING CER- E MUST COMPLETE GN MEDICAL CER- TION WITHIN 48 POWER OF URE CANNOT BE TED

CAUSE

DECEASED—NAME (1. FIRST / MIDDLE / LAST)	DATE OF DEATH (MONTH, DAY, YEAR) (2.)
Oscar Benton Harper	April 21 1986

AGE—LAST BIRTHDAY (YEARS) (3a.)	UNDER 1 YEAR: MOS. (3b.) / DAYS	UNDER 1 DAY: HOURS / MIN. (3c.)	DATE OF BIRTH (MONTH, DAY, YEAR) (4.)	RACE—WHITE, BLACK, AMERICAN INDIAN, ETC. (SPECIFY) (5a.)	ORIGIN OR DESCENT—ITALIAN, MEXICAN, GERMAN, ETC. (SPECIFY) (5b.)	SEX (6.)
79			Jan. 11 1907	White	American	Male

COUNTY OF DEATH (7a.)	CITY, TOWN OR LOCATION (7b.)	INSIDE CITY LIMITS (SPECIFY YES OR NO) (7c.)	HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, SPECIFY PRIVATE RESIDENCE, BUSINESS, STREET, ETC.) (7d.)	IF HOSP OR INST indicate DOA, OP/Emer Rm., Inpatient (Specify) (7e.)
Davidson	Nashville	Yes	Southern Hills	Inp.

STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY) (8.)	CITIZEN OF WHAT COUNTRY (9.)	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) (10.)	SURVIVING SPOUSE (IF WIFE, GIVE MAIDEN NAME) (11.)
Tenn. 43	U.S.A.	Married	Mildred Tally Fuller Harper

SOCIAL SECURITY NUMBER (1.)	SERVICE IN ARMED FORCES (SPECIFY WAR OR DATES OF SERVICE) (12b.)	USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED) (13a.)	KIND OF BUSINESS OR INDUSTRY (13b.)
[redacted]5472 A	No	Roofer	H.L. Roofing Co.

RESIDENCE—STATE (14a.)	COUNTY (14b.)	CITY, TOWN, OR LOCATION (14c.)	STREET AND NUMBER (14d.)	INSIDE CITY LIMITS (SPECIFY YES OR NO) (14e.)	CENSUS TRACT NO (14f.)
Tenn.	Davidson	Nashville	2713 Druid Dr.	Yes	

FATHER—NAME (15.)	MOTHER—MAIDEN NAME (16.)	INFORMANT—NAME AND MAILING ADDRESS (17.)
Arthur Harper	Alta Harel	Mildred Harper 2713 Druid Dr. Nashville Tenn.

BURIAL, CREMATION, REMOVAL, OTHER (SPECIFY) (18a.)	DATE (MONTH, DAY, YEAR) (18b.)	CEMETERY OR CREMATORY—NAME (18c.)	LOCATION—CITY OR TOWN, STATE (18d.)
Burial	April 23 1986	Hermitage	Nashville Tenn.

FUNERAL DIRECTOR (SIGNATURE) (19a.)	LICENSE NO. (19b.)	EMBALMER (SIGNATURE) (19c.)	LICENSE NO. (19d.)
Clyde Green	1313	William Appleton	3310

FUNERAL HOME—NAME AND ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP) (20.)	REGISTRAR—SIGNATURE (21.)	DATE RECEIVED BY LOCAL REGISTRAR (21.)
Ellis Funeral Home Nashville Tenn.	Esther D. Grok	Apr 29 198

PHYSICIAN—I CERTIFY THAT THE DEATH OCCURRED AT THE PLACE, ON THE DATE, AND DUE TO THE CAUSE(S) STATED. (22a.)	SIGNATURE	DEGREE	DATE SIGNED (MONTH, DAY, YEAR) (22b.)
	Roger Martinez M.D.		4/28/86
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. (23a.)	SIGNATURE	TITLE	DATE SIGNED (MONTH, DAY, YEAR) (23b.)

CERTIFIER—NAME (TYPE OR PRINT) (24a.)	MAILING ADDRESS—STREET OR R.F.D. NO. / CITY OR TOWN / STATE / ZIP (24b.)
Roger Martinez, M. D.	Nashville, TN.

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)	Respiratory Failure	
DUE TO, OR AS A CONSEQUENCE OF: (b)	Metastatic Adenocarcinoma, Lung	
CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST: DUE TO, OR AS A CONSEQUENCE OF: (c)		

PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a). — AUTOPSY (YES OR NO) (26.)

Coronary Atherosclerosis, Cerebral Vascular accident, Hypertension — No

ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY) (27a.)	DATE OF INJURY (MONTH, DAY, YEAR) (27b.)	HOUR (27c.)	DESCRIBE HOW INJURY OCCURRED (27d.)
		M.	

INJURY AT WORK (SPECIFY YES OR NO) (27e.)	PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY) (27f.)	LOCATION—STREET OR R.F.D. NO. / CITY OR TOWN / STATE (27g.)

659
9-81 CMC

LAST WILL AND TESTAMENT

OF

OSCAR B. HARPER

(B)

BOOK 6998 PAGE 145

I, Oscar B. Harper, of Davidson County, Tennessee, being of sound and disposing mind and memory, realizing the uncertainty of this life, and with all confidence and trust in my Lord and Savior, Jesus Christ, in His death for my sins on the cross and in His shed blood as an atonement for my soul, and knowing that by faith in His sacricice on the Cross for me I have eternal life; do hereby make, publish and declare this to be my Last Will and Testament.

FIRST. As soon as possible after my death, I direct that all my just debts, all charitable and religious pledges, provided said debts and pledges are legally binding, and all my funeral and estate administration expenses, including flowers, and all just taxes, to be paid from my estate.

SECOND. It is my wish that my funeral and interment be arranged as my next of kin shall direct, and any expenses which may be incurred in connection with the purchase and/or maintenance of a cemetary plot and/or the erection of a suitable monument thereon shall be paid out of my estate.

THIRD. All the rest, residue and remainder of my estate, including real, personal and/or mixed property, wherever situated, I give devise and bequeath to my wife, Mildred T. Harper, absolutely and in fee simple.

FOURTH. In the event my wife, Mildred T. Harper, predeceases me, or she and I die in a common disaster or in a situation where it is impossible to determine who preceases the other, then I direct that $250.00 each be given to Betty Jean Harper and Jo Ann Harper, $10,000.00 be set up in a trust fund for Chad Lee Martin for education only and Angeline H. Martin to act as trustee thereof. The balance of my estate divided equally between Angeline H. Martin and William D. Fuller, Jr.

FIFTH. I hereby nominate and appoint my wife, Mildred T. Harper, as the Executrix of this my Last Will and Testament to serve without bond.

SIXTH. In the event my wife should predecease me or she and I die in a common disaster, then I appoint Angeline H. Martin and William D. Fuller, Jr. to act jointly as Executor/Executrix of this my Last Will and Testament, to serve without bond.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name this 22nd day of May, 1973.

Oscar B. Harper

Oscar B. Harper

Signed by the said Oscar B. Harper, as and for his Last Will and Testament, consisting of two (2) pages, including this, in the presence of, the undersigned who, at his request and in his sight and presence, and in the presence of each other, have subscribed our names as attesting witnesses the day and date above written.

Brookie Crunk residing at 118 Jackson Dr. Hermitage, Tenn.

A C Schenk residing at R#6 Mt Juliet, Tennessee

Ellis Funeral Home, Inc.
2627 NOLENSVILLE ROAD
NASHVILLE, TENNESSEE 37211
(615) 255-5412

STATEMENT OF FUNERAL GOODS AND SERVICES SELECTED

Charges are only for those items that are used. If we are required by law to use any items, we will explain the reasons in writing below.

If you selected a funeral which requires embalming, such as a funeral with viewing, you may have to pay for embalming. You do not have to pay for embalming you did not approve if you selected arrangements such as direct cremation or immediate burial. If we charged for embalming, we will explain why below.

NO. _____

DECEASED Baby Harper
DATE OF DEATH April 21, 1986.
PLACE OF DEATH _____
DATE OF STATEMENT _____

A. CHARGE FOR SERVICES SELECTED

1. *Professional Services:*
   - Services of Funeral Director and Staff ..... _____
   - Embalming ..... _____
   - Other preparation of body ..... _____

2. *Facilities and Equipment:*
   - Use of facilities for viewing/visitation ..... _____
   - Use of facilities for funeral ceremony ..... _____
   - Other use of facilities ..... _____

3. *Automotive Equipment:*
   - Transfer of remains to funeral home ..... _____
   - Hearse ..... _____
   - Use of limousine(s) ..... _____
   - Other ..... _____
   - ..... _____
   - ..... _____

4. *Other services/facilities/equipment:*
   - ..... _____
   - ..... _____

TOTAL OF SERVICES SELECTED ..... $ 1100.00

B. CHARGE FOR MERCHANDISE SELECTED

- Casket or other receptacle 395.00
  - *Name or Number* _____
  - *Material* _____
  - *Color* _____
- Outer burial container 650.00
  - *Name or Number* _____
  - *Material* _____
- Acknowledgement cards ..... _____
- Register book ..... _____
- Memory folders/prayer cards ..... _____
- Clothing ..... _____
- ..... _____
- Cremation urn ..... _____
- ..... _____

TOTAL MERCHANDISE SELECTED ..... $ 1045.00

C. SPECIAL CHARGES

- Forwarding of remains to _____ ..... _____
- Receiving of remains from _____ ..... _____
- Immediate burial ..... _____
- Direct cremation ..... _____
- Other ..... _____

CASH ADVANCES

Certified Copies of Death Certificate
2 @ $ 4.00 each $ 8.00
Clergy _____
Paid Newspaper Notices $ 91.20
TOTAL CASH ADVANCES $ _____

SUMMARY

Total Funeral Home Charges	$ 2145.00
Sales Tax, if applicable	42.24
Total Cash Advances	99.20
GRAND TOTAL	2,286.44

Less Credits and Prepayments:
_____ $ _____
_____ $ _____
_____ $ _____
Total Credits ..... $ _____
BALANCE DUE $ 2,286.44

Billing To _____

DISCLOSURES
Reason for embalming Family Req

If any law, cemetery or crematory requirements have required the purchase of any items listed, the law or requirement is explained below. _____

The only warranty on the casket and/or outer burial container sold in connection with this service is the express written warranty, if any, granted by the manufacturer. This funeral home makes no warranty, express or implied, with respect to the casket and/or outer burial container.

ACKNOWLEDGEMENT AND AGREEMENT

I hereby acknowledge that I have the legal right to arrange the final services for the deceased, and I authorize this funeral establishment to perform services, furnish goods, and incur outside charges specified on this Statement. I acknowledge that I have received, on this date, the General Price List and have been offered for review the Casket Price List and Outer Burial Container Price List. I also acknowledge execution and receipt of a copy of this Statement.

Terms of Payment: The Balance Due is payable _____

After _____ a FINANCE CHARGE of _____% monthly (ANNUAL PERCENTAGE RATE of _____%) will be added to the unpaid portion of the Balance Due, which is the AMOUNT FINANCED. I agree to pay and/or guarantee payment of the charges listed on this Statement, plus any applicable finance charges. In the event of default of payment, I agree to pay reasonable attorney's fees and court costs. I agree that the liability is being personally assumed by me and is in addition to the liability imposed by law upon the estate, and this agreement does not constitute a release of liability. By my signature below, acknowledgement and agree[illegible]de:

PRENEED COUNSELOR SALES RECEIPT

1788

HERMITAGE MEMORIAL GARDENS
P.O. BOX 110
110 SHUTE LANE
HERMITAGE, TN 37076

DATE 5/23/86

RECEIVED FROM Mrs. Mildred L. Harper
Name of Purchaser

THE AMOUNT OF nine hundred sixty eight & 82/100 DOLLARS ($ 968.82)

AS: DOWN PAYMENT ☐ PAYMENT IN FULL ☒ REGULAR PAYMENT ☐

(to 36x13 marker)

[illegible] SERVICES FROM THE ABOVE NAMED CEMETERY.

TENNESSEE DEPARTMENT OF REVENUE

NT 42618

NON-TAXABLE
CERTIFICATE

EXHIBIT "D"

BOOK 6998 PAGE 148

ACCT. NO. 86-10846

To Mr. Tom G. Coleman, Jr.
Attorney at Law
9000 Building
Brentwood, TN 37027

Estate of:
Oscar B. Harper
Davidson County (19)
4-21-86

THIS IS TO CERTIFY that a sworn Return for Inheritance Tax has been filed with this Department by the duly qualified representative of the above named Estate; that investigation has been made of the values placed upon all forms of property set out in the Schedules filed with said Return and found to be correctly appraised, and that, after allowing all lawful debts and other deductions and the statutory exemption applicable thereto, it was ascertained that said Estate was not subject to tax, hence no assessment was made thereon.

As provided in Section 30-1628, Tennessee Code, this certificate shall be authority for the Probate Court of the County wherein said Estate was administered to permit a final settlement or accounting by the aforesaid representative thereof.

This, the 30th day of September, 19 86.

COMMISSIONER OF REVENUE

ve

By Jerry Davis
Director of Miscellaneous Tax Division

RV-0194

06-002-0909