BOOK 10321 PG 9

OLD REPUBLIC
National Title Insurance Company
344 Fourth Avenue North
Nashville, Tennessee 37219-1611

ORT#: SV 2636816

STATE OF TENNESSEE }
COUNTY OF Davidson
THE ACTUAL CONSIDERATION OR VALUE, WHICHEVER IS GREATER, FOR THIS TRANSFER IS $ 95,000.00

John F. Reeder AFFIANT

SUBSCRIBED AND SWORN TO BEFORE, THIS THE 15th DAY OF January, 19 97

NOTARY PUBLIC

My Commission expires: 11-27-99

(615) 385-2804 THIS INSTRUMENT PREPARED BY TN Sup Ct #003143
Marbut Glenn Gaston, Jr.,Lawyer,2211 Crestmoor Rd.,Nashville, TN 37215
NAME ADDRESS

NAME & ADDRESS OF PROPERTY OWNER:	SEND TAX BILLS TO:	MAP & PARCEL NUMBERS:
John F. Reeder (NAME)	Chase Manhattan Mtg. Corp. (NAME)	147-10-60
5037 Edmondson Pk. (ADDRESS)	P. O. Box 11740 (ADDRESS)	6DU-41835
Nashville, TN 37211 (CITY) (STATE) (ZIP)	Monroe, LA 71211-1740 (CITY) (STATE) (ZIP)	

Warranty Deed

5287 01/16 0101 03CHECK 372.50

For and in Consideration of the sum of $ 95,000.00 cash in hand paid by the hereinafter named grantees, and other good and valuable consideration, the receipt of which is hereby acknowledged, we

Frank Allan Lewis and Mark Lee Lewis, heirs-at-law of Sandra Jo M. Lewis (a/k/a Sandra Jo Morrison)

hereinafter called the **GRANTORS**, have bargained and sold, and by these presents do transfer and convey unto

John F. Reeder

hereinafter called the **GRANTEES**, their heirs and assigns, a certain tract or parcel of land in Davidson County, Tennessee, described as follows, to wit:

Land in Davidson County, Tennessee, and being part of Lot No. 305 on the plan of Caldwell Country Estates, Section 5, as of record at Book 3300, page 16, **EXCLUDING** that part of said lot conveyed to Metro Nashville & Davidson County (754.02 sq. ft., more or less) by deed at Book 7088, page 500, both of record in the Register's Office for said County, and both to which reference is hereby made and the same incorporated herein for a complete description of said part of said lot.

Being all the same property conveyed to Sandra Jo M. Lewis (a/k/a Sandra Jo Morrison) by deeds at Book 8528, page 933 and Book 4647, page 984, said Register's Office. The said Sandra Jo Morrison (Lewis) having since died intestate in Davidson County, TN on Nov. 26, 1994, an unmarried person, survived by her two (2) sons, Frank Allan Lewis and Mark Lee Lewis, her sole heirs-at-law and the grantors herein. See also Davidson County Probate Court Clerk's Office, Rule No. 95P-61, Intestate Administration, closed May 5, 1996.

This conveyance is subject to 1997 property taxes, which have been pro-rated this date and the grantee assumes in full, notwithstanding change in the actual 1997 tax amount, and to Restrictive Covenants of record at Book 3279, page 556, plan of record at Book 3300, page 16, and to said deed of conveyance at Book 7088, page 500, all said Register's Office.

Kristi G. Lewis, spouse of said Frank Allan Lewis and Angela M. Lewis, spouse of said Mark Lee Lewis, join herein for the sole but express purpose of waiving any right, title and/or interest in said property as well as convey any and all right, title and/or interest in said property.

See Certified Copy of Death Certificate (#9406016) and Affidavit of Heirship as Exhibits attached hereto and made a part of this Warranty Deed

PICK-UP

97 JAN 16 AM 9:36
DAVIDSON COUNTY, TN.

026461 1
IDENTIFICATION REFERENCE

~~unimproved ( )~~ This is improved (XX) property, known as 5037 Edmondson Pk., Nashville, TN 37211
(House Number) (Street) (City) (State) (Zip)

To Have and to Hold the said tract or parcel of land, with the appurtenances, estate, title and interest thereto belonging to the said GRANTEES, their heirs and assigns, forever. We do covenant with said GRANTEES 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, unless otherwise set out herein. We do further covenant and bind ourselves, our heirs and representatives, to warrant and forever defend the title to the said land to the GRANTEES, their heirs and assigns, against the lawful claims of all persons whomsoever. Wherever used, the singular number shall include the plural, the plural the singular, and the use of any gender shall be applicable to all genders.

Witness our hands this 15th day of January, 19 97.

Frank Allan Lewis

Mark Lee Lewis

Kristi G. Lewis

Angela M. Lewis

INDIVIDUAL ACKNOWLEDGMENTS:

STATE OF TENNESSEE }
County of Davidson }

Personally appeared before me, the undersigned authority, a Notary Public in and for said County and State, the within named Frank Allan Lewis and wife, Kristi G. Lewis and Mark Lee Lewis and wife, Angela M. Lewis, the bargainor(s), with whom I am personally acquainted (or proved to me in the basis of satisfactory evidence), and who acknowledged that they executed the within instrument for the purposes therein contained.

Witness my hand and official seal at office this 15th day of January, 19 97.

My Commission expires:
11-27-99

Notary Public

GLENN GALTON, VA NOTARY PUBLIC AT LARGE

CORPORATE OR PARTNERSHIP ACKNOWLEDGMENT:

STATE OF TENNESSEE }
County of }

Before me, the undersigned authority, a Notary Public in and for the State and County aforesaid, personally appeared _____, with whom I am personally acquainted (or proved to me in the basis of satisfactory evidence), and who, upon oath, acknowledged ____self to be the _____ of _____, the within named bargainor, a corporation (or partnership), and that ___, as such officer (or partner), being authorized so to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation (or partnership) by _____self as such officer (or partner).

Witness my hand and official seal at office this _____ day of _____, 19____.

My Commission expires:

_____

Notary Public

Metropolitan Government of Nashville and Davidson County

Philip Bredesen, Mayor

METROPOLITAN HEALTH DEPARTMENT
311 23RD AVENUE, NORTH
NASHVILLE, TENNESSEE 37203
(615) 862-5900

BOOK 10321 PG 11

This is to certify that this is a true and correct copy of the record filed with the Tennessee Department of Public Health, Vital Records, by the Metropolitan Health Department of Nashville and Davidson County.

This is valid only when the seal of the Metropolitan Health Department of Nashville and Davidson County is affixed.

1486016

TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT

CERTIFICATE OF DEATH

STATE FILE NUMBER

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

NAME OF DECEDENT: For use by physician or institution

DECEDENT

1 DECEDENT'S NAME (First, Middle, Last): SANDRA JO LEWIS
2 SEX: FEMALE
3 DATE OF DEATH (Month, Day, Year): November 26, 1994
4 SOCIAL SECURITY NUMBER: [redacted]-2229
5a AGE - LAST BIRTHDAY (Yrs.): 47
5b UNDER 1 YEAR: MOS. / DAYS
5c UNDER 1 DAY: HOURS / MIN.
6 DATE OF BIRTH (Month, Day, Year): May 4, 1947
7 BIRTHPLACE (City and State or Foreign Country): MARTINEZ, CA,
8 WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 Yes 2 X No
9a PLACE OF DEATH (Check only one): HOSPITAL 1 X Inpatient 2 ER/Outpatient 3 DOA; OTHER 4 Nursing Home 5 Residence 6 Other (Specify)
9b FACILITY NAME (If not institution, give street and number): SOUTHERN HILLS
9c CITY, TOWN, OR LOCATION OF DEATH: NASHVILLE
9d COUNTY OF DEATH: DAVIDSON
10 MARITAL STATUS—Married, Never Married, Widowed, Divorced (Specify): DIVORCED
11 SURVIVING SPOUSE (If wife, give maiden name):
12a DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.): SECRETARY
12b KIND OF BUSINESS/INDUSTRY: INSURANCE
13a RESIDENCE—STATE: TN
13b COUNTY: DAVIDSON
13c CITY, TOWN OR LOCATION: NASHVILLE
13d STREET AND NUMBER OR RURAL LOCATION: 5000 W. DURRETT DRIVE
CENSUS TRACT
13e INSIDE CITY LIMITS? 1 X Yes 2 No
13f ZIP CODE: 37211
14 WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No—If yes, specify Cuban, Mexican, Puerto Rican, etc.) Yes 0 X No. Specify if yes:
15 RACE—American Indian, Black, White, etc. (Specify): WHITE
16 DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (0-12): ; College (1-4 or 5+): 1

PARENTS

17 FATHER'S NAME (First, Middle, Last): RICHARD LEE MORRISON
18 MOTHER'S NAME (First, Middle, Maiden Surname): DELORES STEWART

INFORMANT

19a INFORMANT'S NAME (Type/Print): MR. FRANK LEWIS
19b RELATIONSHIP TO DECEASED: SON
19c MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 2909 FRANKLIN ROAD, NASHVILLE, TN 37204

DISPOSITION

20a METHOD OF DISPOSITION: 1 X Burial 2 Cremation 3 Removal from State 4 Donation 5 Other (Specify)
20b PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): OLD ZION CEMETERY
20c LOCATION—City or Town, State: SMITHVILLE, TN

FUNERAL DIRECTOR

21a SIGNATURE OF FUNERAL DIRECTOR: TRACEY BOND
21b LICENSE NUMBER OF FUNERAL DIRECTOR: 3930
21c SIGNATURE OF EMBALMER: PAM HUNTER
21d LICENSE NUMBER OF EMBALMER: 4323
22a NAME AND ADDRESS OF FUNERAL HOME: WOODLAWN FUNERAL HOME 660 THOMPSON LANE NASHVILLE, TN 37204
22b LICENSE NUMBER OF FUNERAL HOME: 933

REGISTRAR

23 REGISTRAR'S SIGNATURE: Patricia Jaunt
24 DATE FILED (Month, Day, Year): November 28, 1994

PHYSICIAN

25a PHYSICIAN — To the best of my knowledge death occurred at the time, date, and place and due to the cause(s) and manner as stated.
1 SIGNATURE AND TITLE OF PHYSICIAN: Angela E May
25b LICENSE NUMBER: MD020519
25c DATE SIGNED (Month, Day, Year): 11/28/94
26a MEDICAL EXAMINER — On the basis of examination and/or investigation, in my opinion, death occurred at the time, date and place and due to the cause(s) and manner as stated.
2 SIGNATURE AND TITLE OF MEDICAL EXAMINER
26b LICENSE NUMBER
26c DATE SIGNED (Month, Day, Year)

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CERTIFICATE MUST COMPLETE AND SIGN MEDICAL CERTIFICATION WITHIN 48 HOURS.

27 NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print): Dr. Angela May 395 Wallace Rd Ste 202 Nashville, TN 37211

CAUSE OF DEATH

28 PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. (Approximate Interval Between Onset and Death)

IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. ANOXIA except Coparty
DUE TO (OR AS A CONSEQUENCE OF):
Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST
b. asphyxiation
DUE TO (OR AS A CONSEQUENCE OF):
c. smoke inhalation
DUE TO (OR AS A CONSEQUENCE OF):
d. House fire

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.

29a WAS AN AUTOPSY PERFORMED? 1 Yes 2 No
29b WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? 1 Yes 2 No

30. MANNER OF DEATH: 1 Natural 6 Pending Investigation 2 Accident 3 Suicide 6 Could not be Determined 4 Homicide
31a DATE OF INJURY (Month, Day, Year)
31b TIME OF INJURY
31c INJURY AT WORK? 1 Yes 2 No
31d DESCRIBE HOW INJURY OCCURRED
31e PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)
31f LOCATION (Street and Number or Rural Route Number, City or Town, State)

SEE INSTRUCTIONS ON OTHER SIDE

BIRTH NO.

Exhibit to Warranty Deed: Lewis to Reeder

TN 1069
REV 1/89

RECEIVED

AFFIDAVIT OF HEIRSHIP

The undersigned, Frank Allan Lewis **, hereinafter referred to as Affiant, being first duly sworn, makes oath as follows:**

BOOK 10321 PG 12

(1) That Affiant presently resides at the following address:

1213 Saxony Lake Drive
Antioch, TN 37013

(2) That Affiant personally knew Sandra Jo Morrison (a/k/a Sandra Jo M. Lewis) **, the deceased, hereinafter referred to as Decedent, and has personal knowledge of the family of Decedent by reason of the following circumstances:**

I am her son

(3) That Affiant (X) is ~~or ( ) is not~~ ... related to Decedent by blood or by marriage.

(4) That Affiant (XX) has ~~or ( ) does not have~~ ... a financial interest in the hereinafter described property.

(5) That Affiant (XX) knew ~~or ( ) is advised~~ ... that at the date of death, said Decedent (XX) owned or ( ) held an interest in ... the following described real estate in Davidson **County, Tennessee, to wit:**

Land in Davidson County, Tennessee, and being part of Lot No. 305 on the plan of Caldwell Country Estates, Section 5, as of record at Book 3300, page 16, **EXCLUDING** that part of said lot conveyed to Metro Nashville & Davidson County (754.02 sq. ft., more or less) by deed at Book 7088, page 500, both of record in the Register's Office for said County, and both to which reference is hereby made and the same incorporated herein for a complete description of said part of said lot.

(6) That Decedent died on November 26, 1994 **, and was at that time a resident of** Nashville, Davidson County, Tennessee

(7) That Decedent died intestate **(intestate/testate).**

(8) That n/a **was the surviving spouse of Decedent, or was the said spouse of the Decedent but who predeceased Decedent on**

(9) That said surviving spouse n/a **presently living.**

(10) That the following persons are all of the children born to or adopted by Decedent during his / her lifetime:

Frank Allan Lewis (son)
Mark Lee Lewis (son)

(11) That the following persons constituted all of the heirs-at-law (and surviving spouse, if applicable) of the decedent at his / her date of death: n/a **, as surviving spouse, and** Frank Allan Lewis and Mark Lee Lewis

Exhibit to Warranty Deed: Lewis to Reeder

(12) That the following persons constitute, as of the date of execution of this Affidavit, all of the heirs-at-law of Decedent:

NAME:	AGE:	ADDRESS:
Frank Allan Lewis	29	1213 Saxony Lake Drive Antioch, TN 37013
Mark Lee Lewis	26	904 Conway Lane Old Hickory, TN 37138

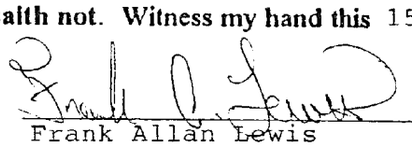
(NOTE: In the event that the persons identified as heirs-in-law in paragraph (11) above, are not the same as the persons identified in paragraph (12) above, those persons so identified in paragraph (11) and not so identified in paragraph (12) should be treated by a separate AFFIDAVIT OF HEIRSHIP); and

(13) Additional information, if any, either known or understood to be true by Affiant:

See also Final Decree of Divorce of record in Minute Book 63C, page 2400, Probate Court for Davidson County, Tennessee, divorce between Charles B. Lewis, Jr. and Sandra Jo M. Lewis.

The said Sandra Jo Morrison (a/k/a Sandra Jo M. Lewis) was an unmarried person at her death.

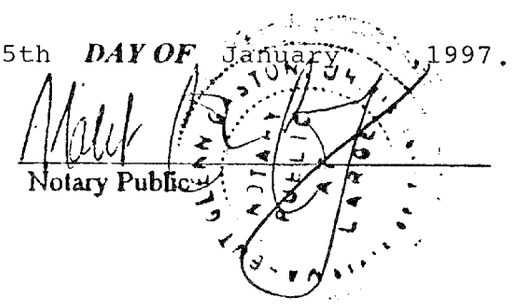
Further Affiant saith not. Witness my hand this 15th **day of** January , 1997



Frank Allan Lewis, **Affiant**

STATE OF TENNESSEE :
COUNTY OF DAVIDSON :

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 15th ***DAY OF*** January , 1997.

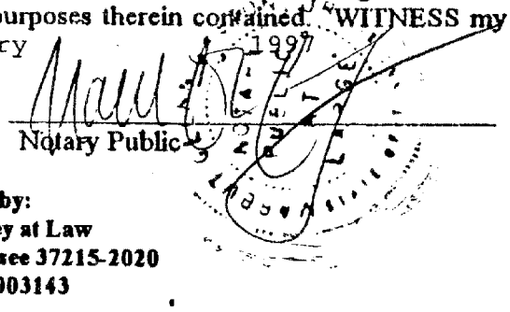


My commission expires: 11-27-99

Notary Public

STATE OF TENNESSEE :
COUNTY OF DAVIDSON :

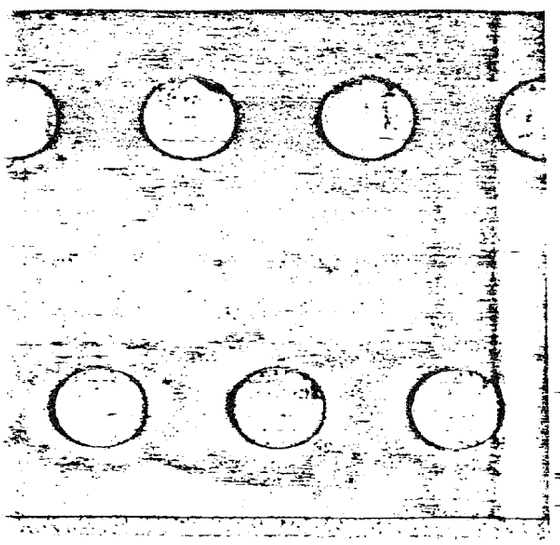
Personally appeared before me, the undersigned, a Notary Public in and for said County and State, the within named Frank Allan Lewis , **the Affiant, or the bargainor, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence, and who acknowledged that he / she executed the foregoing AFFIDAVIT OF HEIRSHIP for the purposes therein contained. WITNESS my hand and official seal at office on this** 15th **day of** January , 1997.



My commission expires: 11-27-99

Notary Public

This instrument is prepared by:
Marbut Glenn Gaston, Jr., Attorney at Law
2211 Crestmoor Road, Nashville, Tennessee 37215-2020
(615) 385-2804 ... TN Sup Ct. #: 003143



OFFICIAL RECEIPT

FELIX Z. WILSON, II

REGISTER OF DAVIDSON COUNTY

NASHVILLE, TENNESSEE

RECEIVED OF _____

FOR _____ BOOK 10321 PG 14

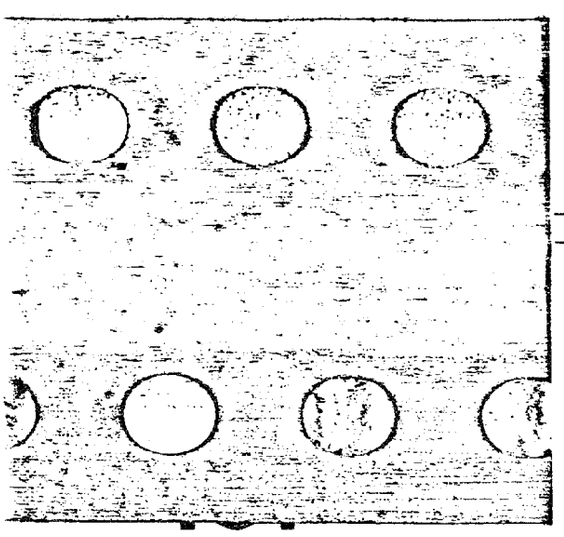
CO - CONVEYANCE	CC - CERTIFIED COPY	MISC - MISCELLANEOUS
MO - MORTGAGE	REL - RELEASE	CO TX - STATE TAX CONVEY
WD - WARRANTY DEED	UCC - UNIFORM COMMERCIAL CODE	MO TX - STATE TAX MORT
TD - TRUST DEED		PRFEE - PROBATE FEE

DATE	SYMBOL	VALUATION	TAX AND FEES	TOTAL PAID

CAMT 95000.00
CON TX 351.50
PRFEE 1.00
TDEED 20.00
TOTAL 372.50
CHECK 372.50

01/16/97 01 09:40 0001 5287

RECEIPT IS NOT VALID UNTIL CHECK IS PAID BY BANK



026461 1
IDENTIFICATION REFERENCE

97 JAN 16 AM 9:37
FELIX Z. WILSON, II REGISTER
DAVIDSON COUNTY, TN.

No. 1107788