Davidson County WILL
Recvd: 02/02/01 10:31 8pgs
Fees:34.00 Taxes:0.00
20010202-0010337

LAST WILL AND TESTAMENT
OF
OLLIE AYERS REDDING

IN DEI NOMINE, AMEN:

I, OLLIE AYERS REDDING, now of Goodlettsville, Davidson County, Tennessee, being of sound mind and disposing memory, do make, publish, and declare this to be my last will and testament hereby revoking all former wills and codicils to wills heretofore made by me.

ITEM I.

I direct that all of my lawful debts, my funeral expenses, the expense of administration of my estate, and inheritance, estate, or other death taxes that may be imposed upon my estate, including interest and penalties thereon, be paid by my Executor as soon as practicable after my death without apportionment or proration among the beneficiaries, legatees and devisees.

ITEM II.

I give, devise, and bequeath any real estate I may own at my death unto my children, LEE BOYD REDDING, LOTTIE D. PROCTOR, and EDNA REDDING BURLASON, in equal shares, share and share alike, or the survivor of them, or their issues.

Prepared by:
CARL H. OLDHAM
ATTORNEY AT LAW
365 WEST MAIN STREET
HENDERSONVILLE, TENNESSEE
37075
615-824-0989

In the event my said children wish to sell my real estate, then it is my wish that any of my grandchildren who wish to purchase same have the first opportunity to do so. In the event none of said grandchildren wish to purchase my real estate, then it is my wish that GUY KNOX be given a chance to purchase said real estate. In the event none of the above wish to purchase my real estate, then my children may do as they wish with my real estate.

I give, devise, and bequeath unto my children and grandchildren to be divided equally between them, the total sum of Five Thousand ($5,000.00) Dollars.

All the rest, remainder, and residue of my estate I give, devise, and bequeath unto my children, LEE BOYD REDDING, LOTTIE D. PROCTOR, and EDNA REDDING BURLASON in equal shares, share and share alike, or the survivor of them, or their issue per stirpes.

ITEM III.

I hereby nominate, constitute and appoint EDNA R. BURLASON as Executrix of this my Last Will and Testament. If EDNA R. BURLASON does not survive me, or fails to qualify, then I appoint LEE BOYD REDDING as Executor. I direct that no bond or other security be required of said Executor, and that no inventory be required of my Executor.

IN WITNESS WHEREOF, I have set my hand to this my Last Will and Testament on this the 10 day of March, 1987, at Hendersonville, Tennessee.

Ollie Ayers Redding
OLLIE AYERS REDDING

CARL H. OLDHAM
ATTORNEY AT LAW
365 WEST MAIN STREET
HENDERSONVILLE, TENNESSEE
37075
615-824-0989

Signed, sealed, published and declared by the testatrix, OLLIE AYERS REDDING, to be her Last Will and Testament in the presence of all of us at one and the same time, and we at her request and in her presence, and in the presence of each other, have hereunto subscribed our names as witnesses, and we do hereby attest to the sound and disposing mind of said testatrix and to the performance of the aforesaid act of execution at the place and on the date hereinabove set out.

Madeline Akin residing at 201 Isaac Dr Goodlettsville 37072

Carl H Oldham residing at 257 Blue Grass Dr Hendersonville TN

CARL H. OLDHAM
ATTORNEY AT LAW
365 WEST MAIN STREET
HENDERSONVILLE, TENNESSEE
37075
615-824-0989

STATE OF TENNESSEE

COUNTY OF SUMNER

Before me, the undersigned Notary Public, personally appeared the undersigned affiants, whose names are subscribed to the instrument to which this Affidavit is attached and, after being duly sworn, delcared to me that, in their sight and presence OLLIE AYERS REDDING signed, declared and published the instrument to which this Affidavit is affixed or annexed as the testatrix's will and requested them to act as witnesses to its execution and to execute this Affidavit; that in the testatrix's sight and presence and in the sight and presence of each other, each affiant signed the instrument as witnesses; and that the testatrix was at that time 18 years of age or over, was of sound mind and disposing memory, was fully capable of making a will and was under no duress, compulsion, or constraint.

Madeline Akin

Carl H Oldham

Subscribed and sworn to before me this the 10 day of March, 1987.

Paulette P. Oldham
NOTARY PUBLIC

My Commission Expires:
1-22-91



CARL H. OLDHAM
ATTORNEY AT LAW
365 WEST MAIN STREET
HENDERSONVILLE, TENNESSEE
37075
615-824-0989

CODICIL NO. 2

TO THE

LAST WILL AND TESTAMENT

OF

OLLIE AYERS REDDING

I, OLLIE AYERS REDDING, having heretofore made and published my Last Will and Testament, on March 10, 1987, and having made a Holographic Codicil thereto on February 22, 1992, make and declare this Codicil No. 2 thereto, to wit:

I delete paragraph 3 of Item II. of my said Last Will and Testament in its entirety and insert in lieu thereof the following:

I bequeath to each of my grandchildren the sum of $500.00, and to each of my great-grandchildren the sum of $100.00.

Ollie Ayers Redding

OLLIE AYERS REDDING

CARL H. OLDHAM
ATTORNEY AT LAW
365 WEST MAIN STREET
HENDERSONVILLE, TN
37075
615-924-0989

I hereby ratify, republish, and reaffirm said Will and Codicil No. 1 thereto in all respects as modified by this Codicil thereto.

IN WITNESS WHEREOF, I have hereunto set my hand to this Codicil No. 2 to my Last Will and Testament at Hendersonville, Tennessee, on this the 26 day of February, 1992.

Ollie Ayers Redding
OLLIE AYERS REDDING

Signed, sealed, published, and declared by the Testatrix, OLLIE AYERS REDDING, to be Codicil No. 2 to her Last Will and Testament in the presence of all of us at one and the same time, and we at her request and in her presence, and in the presence of each other, have hereunto subscribed our names as witnesses, and we do hereby attest to the sound and disposing mind of said Testatrix, and to the performance of the aforesaid act of execution at the place and on the date herein above set out.

Carl H Oldham
(CARL H. OLDHAM) residing at 257 Blue Grass Drive
Hendersonville, Tennessee 37075

Madeline Akin
(Madeline Akin) residing at 201 ISAAC DR.
GOODLETTSVILLE, TN. 37072

CARL H. OLDHAM
ATTORNEY AT LAW
365 WEST MAIN STREET
HENDERSONVILLE, TN
37075
615-924-0989

STATE OF TENNESSEE

COUNTY OF SUMNER

Before me, the undersigned Notary Public, personally appeared the undersigned affiants, whose names are subscribed to the instrument to which this Affidavit is attached and after being duly sworn, declared to me that in their sight and presence OLLIE AYERS REDDING signed, declared and published the instrument to which this Affidavit is affixed or annexed as the Testatrix's Codicil No 2. to her will and requested them to act as witnesses to its execution and to execute this Affidavit; that in the Testatrix's sight and presence and in the sight and presence of each other, each affiant signed the instrument as witnesses; and that the Testatrix was at that time 18 years of age or over, was of sound mind and disposing memory, was fully capable of making a codicil and was under no duress, compulsion, or constraint.

Carl H Oldham
(CARL H. OLDHAM)

Madeline Akin
(MADELINE AKIN)

Subscribed and sworn to before me this the 26 day of February, 1992.

Lauretta P. Oldham
NOTARY PUBLIC

My Commission Expires:
12-27-94

LAURETTA P. OLDHAM NOTARY PUBLIC SUMNER COUNTY, TENN.

Ollie Ayers Redding
OLLIE AYERS REDDING

CARL H. OLDHAM
ATTORNEY AT LAW
365 WEST MAIN STREET
HENDERSONVILLE, TN
37075
615-924-0989

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH

1999 011922

CERTIFICATE OF DEATH

1. DECEDENT'S NAME (First, Middle, Last): Ollie Mai Redding		2. SEX: Female	3. DATE OF DEATH (Month, Day, Year): March 14, 1999
4. SOCIAL SECURITY NUMBER (of Deceased): 414-56-5993	5a. AGE-LAST BIRTHDAY (Years): 93	6. DATE OF BIRTH (Month, Day, Year): Mar 2, 1906	7. BIRTHPLACE (City and State or Foreign Country): Goodlettsville, TN

8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 Yes 2 [X] No

9a. PLACE OF DEATH (Check only one): 1 [X] Inpatient (HOSPITAL) 2 ER/Outpatient 3 DOA 4 Nursing Home 5 Residence 6 Other (Specify) (OTHER)

9b. FACILITY NAME (If not institution, give street and number): Hendersonville Hospital 303	9c. CITY, TOWN, OR LOCATION OF DEATH: Hendersonville		9d. COUNTY OF DEATH: Sumner
10. MARITAL STATUS—Married, Never Married, Widowed, Divorced (Specify): Widowed	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.): Homemaker	12b. KIND OF BUSINESS/INDUSTRY: Homemaking
13a. RESIDENCE—STATE: TN	13b. COUNTY: Davidson	13c. CITY, TOWN OR LOCATION: Goodlettsville	13d. STREET AND NUMBER OR RURAL LOCATION: 4975 Brick Church Pike

13e. INSIDE CITY LIMITS? 1 [X] Yes 2 [ ] No	13f. ZIP CODE: 37072	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): 8	College(1-4 or 5+):

17. FATHER'S NAME (First, Middle, Last): Morris Earl Ayers	18. MOTHER'S NAME (First, Middle, Maiden Surname): Ethel Lee White	
19a. INFORMANT'S NAME (Type/Print): Mrs. Edna Burlason	19b. RELATIONSHIP TO DECEASED: Daughter	19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 4986 Brick Church Pike, Goodlettsville, TN

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): Union Hill Cemetery	20c. LOCATION—City or Town, State: Goodlettsville TN	
21a. SIGNATURE OF FUNERAL DIRECTOR: ▶ Jerry Briggs	21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 4179	21c. SIGNATURE OF EMBALMER: ▶ Ronnie Harrell	21d. LICENSE NUMBER OF EMBALMER: 5022
22a. NAME AND ADDRESS OF FUNERAL HOME: COLE & GARRETT FUNERAL HOMES INC. 127 N. MAIN STREET, GOODLETTSVILLE, TN 37072-0444		22b. LICENSE NUMBER OF FUNERAL HOME: 718	
23. REGISTRAR'S SIGNATURE: Mary Anne Crompton, Registrar		24. DATE FILED (Month, Day, Year): MAR 23 1999	

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: (D.O.) Michael R Bernui DO.	25b. LICENSE NUMBER: D.O. 000813	25c. DATE SIGNED (Month, Day, Year): 3-19-99
26a. MEDICAL EXAMINER — On the basis of examination and/or investigation, in my opinion, death occurred at the time, 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):

MED. EX. 27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print): Michael Bernui, M.D., 353 New Shackle Island Road, Henderosnville, TN 37075

28. MANNER OF DEATH: 1 [X] Natural 2 Accident 3 Suicide 4 Homicide 5 Pending Investigation 6 Could not be Determined	29. DATE OF INJURY (Month, Day, Year): M	30. TIME OF INJURY	30a. AMOUNT AT WORK: 1 Yes 2 No	30b. DESCRIBE HOW INJURY OCCURRED:
	31a. 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):	

BIRTH NO

RDA 1399

I hereby certify the above to be a true and correct copy of the original document on file in this department. This certified copy is valid only when printed on security paper showing the red embossed seal of the Department of Health. Alteration or erasure voids this certification.

Tennessee Code Annotated 68-3-101 et seq., Vital Records Act of 1977.

Paula Taylor
Paula Taylor
State Registrar

Jan-29-2001
Date Issued

THE GREAT SEAL OF THE STATE OF TENNESSEE XVI AGRICULTURE COMMERCE 1796

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD