ADDRESS NEW OWNER:	SEND TAX BILLS TO:	MAP-PARCEL NOS
Jeanne Terry Culbreth		
390 Coventry Drive	*SAME*	Map 6D
Nashville, TN 37211		Parcel 66355

This instrument prepared by: Waynick & Cate (DJW)
P.O. Box 148058, Nashville, TN 37214 (This instrument prepared from information furnished by parties)

Davidson County AFFIDAVIT
Recvd: 06/01/01 12:06 9pgs
Fees:38.00 Taxes:0.00
20010601-0057071

AFFIDAVIT OF INHERITANCE

STATE OF TENNESSEE
COUNTY OF DAVIDSON

The undersigned, being duly sworn, depose and say:

Mary Louise Terry, the owner of the following described real estate:

> Being Lot 6 on the Plan of Section II, Elysian Park, as of record in Book 2854, Page 40, Register's Office for said County, described as follows: BEGINNING at a point in the north margin of Coventry Drive, at the corner of Lots No. 5 and 6; thence with the margin of said Drive, west 131.3 feet to a monument; thence around a curve, northwesterly 38.88 feet to a monument in the east margin of Sheffield Drive; thence with the margin of the same, north 110.4 feet to a corner of Lots No. 6 and 7; thence east along the line of said lots, 163.8 feet to a corner of Lots No. 5 and 6; thence south along the line between said lots, 140.3 feet to the point of beginning.

William H. Terry having predeceased his wife on April 30, 1965. Mary Louise Terry died on June 1, 1975, a resident of Davidson County, Tennessee (a copy of her death certificate and obituary are attached as Exhibit A). Leaving Sara Louise Hartfield and Jeanne Terry Culbreth as the sole heirs at law receiving the following described interest in the decedent's real estate described:

1. Sara Louise Hartfield - ½ interest as tenants in common
2. Jeanne Terry Culbreth - ½ interest as tenants in common

Sara Louise Hartfield having since died on October 1, 1993 (a copy of her death certificate and obitiaury are attached as Exhibit B) leaving as her heirs 3 children; James H. Hartfield, William A. Hartfield and Edna Elaine Thomas and devising her ½ interest as tenant in common in said property to her daughter, Edna Elaine Thomas by an unprobated holographic will dated November 16, 1987 (a

copy of the will is attached as Exhibit C)

Said property is presently owned in fee simple as:

1. Edna Elaine Thomas - ½ interest as tenants in common
2. Jeanne Terry Culbreth - ½ interest as tenants in common

The Tennessee Inheritance Tax clearance has been received being receipt number [redacted]-8319, a copy of which is attached as Exhibit D.

There are no debts or encumbrances remaining which are or might become a lien on said interest in the described real estate.

Jeanne Terry Culbreth
Jeanne Terry Culbreth
(Heir At Law Of Mary Louis Terry)

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 Jeanne Terry Culbreth, the bargainor, 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 this 7th day of December, 1999.

Amy Beth Walpole
Notary Public
My Commission Expires: 2-3-2001

AMY BETH WALPOLE
NOTARY PUBLIC AT LARGE
WILSON COUNTY, TENN.

Edna Elaine Thomas
Edna Elaine Thomas
(Devisee and Heir At Law Of
Sara Louise Hartfield)

STATE OF Tennessee
COUNTY OF Rutherford

Personally appeared before me, the undersigned, a Notary Public in and for said County and state, the within named Edna Elaine Thomas, the bargainor, 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 this 15th day of Dec., 1999.

Notary Public
My Commission Expires: 4/22/2001

James H. Hartfield
(Heir At Law Of
Sara Louise Hartfield)

STATE OF California
COUNTY OF Stanislaus

Personally appeared before me, the undersigned, a Notary Public in and for said County and state, the within named James H. Hartfield, the bargainor, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged that he executed the within instrument for the purposes therein contained.

WITNESS my hand and official seal this 28th day of December, 1999.

RAQUEL PARTIDA
Commission # 1194348
Notary Public - California
Stanislaus County
My Comm. Expires Aug 23, 2002

Notary Public
My Commission Expires: August 23, 2002

William A. Hartfield
(Heir At Law Of
Sara Louise Hartfield)

STATE OF Calif.
COUNTY OF Los Angeles

Personally appeared before me, the undersigned, a Notary Public in and for said County and state, the within named William A. Hartfield, the bargainor, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged that he executed the within instrument for the purposes therein contained.

WITNESS my hand and official seal this 18th day of January, ~~1999~~ 2000. RE

Notary Public
My Commission Expires: 8/17/02

ROBYN EMERSON
Commission # 1193815
Notary Public - California
Los Angeles County
My Comm. Expires Aug 17, 2002

Exhibit A
in part

RAY BLANTON
GOVERNOR

STATE OF TENNESSEE
DEPARTMENT OF PUBLIC HEALTH
NASHVILLE 37219

STATE REGISTRAR ISSUED
JUN 27 1975

Eugene W. Fowinkle, M.D., M.P.H.
Commissioner

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 Public Health and multi-color seal of State Registrar are affixed.

EUGENE W. FOWINKLE, M.D.
Commissioner

CERTIFICATE OF DEATH

TENNESSEE DEPARTMENT OF PUBLIC HEALTH FILE NO.
VITAL RECORDS

BIRTH NO.

DECEASED — NAME (1. First: Mary; Middle: Louise; Last: Terry)

2. DATE OF DEATH (MONTH, DAY, YEAR): 6-1-75

3. RACE (WHITE, NEGRO, AMERICAN INDIAN, ETC. (SPECIFY)): W

4. SEX: F

5a. AGE — LAST BIRTHDAY (YEARS): 84

5b. UNDER 1 YEAR — MOS.: DAYS:

5c. UNDER 1 DAY — HOURS: MIN.:

6. DATE OF BIRTH (MONTH, DAY, YEAR): May, 20-1891

7a. COUNTY OF DEATH: Davidson

7b. CITY, TOWN, OR LOCATION OF DEATH: Nashville

7c. INSIDE CITY LIMITS (SPECIFY YES OR NO): Yes

7d. HOSPITAL OR OTHER INSTITUTION — NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER): General

8. STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY): Tenn.

9. CITIZEN OF WHAT COUNTRY: USA.

10. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): Widowed

11. SURVIVING SPOUSE (IF WIFE, GIVE MAIDEN NAME): -

12a. SOCIAL SECURITY NUMBER: [redacted]-8319

12b. SERVICE IN ARMED FORCES (SPECIFY WAR OR DATES OF SERVICE): No

13a. USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED): House Wife

13b. KIND OF BUSINESS OR INDUSTRY: Home Maker

14a. RESIDENCE — STATE: Tenn.

14b. COUNTY: Davidson

14c. CITY, TOWN, OR LOCATION: Nashville

14d. INSIDE CITY LIMITS (SPECIFY YES OR NO): Yes

14e. STREET AND NUMBER: 390 Coventry Dr.

15. FATHER — NAME: John T. Shumate

16. MOTHER — MAIDEN NAME: Adelaid Patton

17. INFORMANT — NAME: Jeanne Culberth. MAILING ADDRESS: 390 Coventry Dr.

18. PART I. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), and (c)) — APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

IMMEDIATE CAUSE
(a) Cardiopulmonary arrest — Immediate

DUE TO, OR AS A CONSEQUENCE OF:
(b) Myocardial infarction - probable — minutes

CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (a), STATING THE UNDERLYING CAUSE LAST
DUE TO, OR AS A CONSEQUENCE OF:
(c) Atherosclerotic cardiovascular disease — years

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

Hypertension, Arteriosclerotic arthritis, colonic polyp s/p surgery

19. AUTOPSY (YES OR NO): No

20. WERE FINDINGS CONSIDERED IN DETERMINING CAUSE OF DEATH

20a. ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY)

20b. DATE OF INJURY (MONTH, DAY, YEAR)

20c. HOUR: M.

20d. HOW INJURY OCCURRED (IF MORE THAN ONE INJURY, STATE NATURE OF INJURY IN PART I OR PART II, ITEM 18)

20e. INJURY AT WORK (SPECIFY YES OR NO)

20f. PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY)

20g. LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, STATE)

PHYSICIAN — CERTIFICATION
I ATTENDED THE DECEASED AND DEATH OCCURRED AT THE PLACE, ON THE DATE, AND, TO THE BEST OF MY KNOWLEDGE, DUE TO THE CAUSE(S) STATED.
SIGNATURE: David Gunn — DEGREE: MD
21a. DATE SIGNED (MONTH, DAY, YEAR): 6/4/75

MEDICAL EXAMINER — CERTIFICATION
ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR THE INVESTIGATION, IN MY OPINION, DEATH OCCURRED ON THE DATE AND DUE TO THE CAUSE(S) STATED.
SIGNATURE — TITLE
22a. DATE SIGNED (MONTH, DAY, YEAR)

23a. CERTIFIER — NAME (TYPE OR PRINT): David Gunn, M.D.

23b. MAILING ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP): General Hospital, Nashville, Tennessee

24a. BURIAL, CREMATION, REMOVAL (SPECIFY): Burial

24b. DATE (MONTH, DAY, YEAR): 6-3-75

24c. CEMETERY OR CREMATORY — NAME: Mt Olivet

24d. LOCATION — CITY OR TOWN: Nashville, Tenn. — STATE:

25. FUNERAL HOME — NAME AND ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP): Ellis Funeral Home, 2627 Nolensville Rd.

26a. REGISTRAR — SIGNATURE: Esther D. Groves

26b. DATE RECEIVED BY REGISTRAR: 6-6

Metropolitan Government of Nashville and Davidson County

Philip Bredesen, Mayor

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

Exhibit B in part

OCT 21 1993

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.

TENNESSEE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

STATE FILE NUMBER: 9305234

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last): SARA LOUISE HARTFIELD
2. SEX: FEMALE
3. DATE OF DEATH (Month, Day, Year): OCTOBER 1, 1993
4. SOCIAL SECURITY NUMBER (of Deceased): [redacted]-7408
5a. AGE – LAST BIRTHDAY (Years): 77
5b. UNDER 1 YEAR – MOS.
5c. UNDER 1 DAY – HOURS / MIN.
6. DATE OF BIRTH (Month, Day, Year): JUNE 29,1916
7. BIRTHPLACE (City and State or Foreign Country): NASHVILLE, TN.
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 8 [ ] Other (Specify)
9b. FACILITY NAME (If not institution, give street and number): VANDERBILT HOSPITAL
9c. CITY, TOWN, OR LOCATION OF DEATH: NASHVILLE
9d. COUNTY OF DEATH: DAVIDSON
10. MARITAL STATUS – Married, Never Married, Widowed, Divorced (Specify): WIDOWED
11. SURVIVING SPOUSE (If wife, give maiden name): NONE
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: LEGAL
13a. RESIDENCE – STATE: TN.
13b. COUNTY: RUTHERFORD
13c. CITY, TOWN OR LOCATION: MURFREESBORO
13d. STREET AND NUMBER OR RURAL LOCATION: 5237 KING TUCK'S ROAD
CENSUS TRACT
13e. INSIDE CITY LIMITS? 1 [ ] Yes 2 [X] No
13f. ZIP CODE: 37129
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): 12; College (1-4 or 5+):

NAME OF DECEDENT: For use by physician or institution

PARENTS

17. FATHER'S NAME (First, Middle, Last): WILLIAM TERRY
18. MOTHER'S NAME (First, Middle, Maiden Surname): LOUISE SHOEMATE

INFORMANT

19a. INFORMANT'S NAME (Type/Print): EDNA THOMAS
19b. RELATIONSHIP TO DECEASED: DAUGHTER
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 5237 KING TUCK'S ROAD, MURFREESBORO, TN. 37129

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): ST. JOHN'S CEMETERY
20c. LOCATION – City or Town, State: BARTONVILLE, ILLINOIS
21a. SIGNATURE OF FUNERAL DIRECTOR: ▶ J. MICHAEL TODD
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 3757
21c. SIGNATURE OF EMBALMER: ▶ J. MICHAEL TODD
21d. LICENSE NUMBER OF EMBALMER: 3956
22a. NAME AND ADDRESS OF FUNERAL HOME: WOODFIN FUNERAL CHAPEL, INC. P.O. BOX 636, MURFREESBORO, TN. 37130
22b. LICENSE NUMBER OF FUNERAL HOME: 179

REGISTRAR

23. REGISTRAR'S SIGNATURE: ▶ Theresa H. Biggerstaff
24. DATE FILED (Month, Day, Year): October 21, 1993

CERTIFIER

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: ▶ Russell F. DeVore MD
25b. LICENSE NUMBER: MD018111
25c. DATE SIGNED (Month, Day, Year): 10/18/93

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):

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): Russell F. DeVore MD Vanderbilt Univ 1956 TVC Nashville TN

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.	Metastatic Sarcoma	6 months
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.		
DUE TO (OR AS A CONSEQUENCE OF):		
c.		
DUE TO (OR AS A CONSEQUENCE OF):		
d.		

SEE INSTRUCTIONS ON OTHER SIDE

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 2 [ ] Accident 3 [ ] Suicide 4 [ ] Homicide 6 [ ] Pending Investigation 8 [ ] Could not be Determined
31a. DATE OF INJURY (Month, Day, Year):
31b. TIME OF INJURY: M
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)

BIRTH NO

PH-1659
REV 1/99

Exhibits A & B
in part

OBITUARIES

Sara Hartfield

Graveside services for Sara Louise Hartfield, 77, of Murfreesboro, who died Friday at Vanderbilt University Medical Center, will be 10 a.m. Tuesday at St. John's Cemetery in Bartonville, Ill.

A Nashville native, she was the daughter of the late William and Louise Shoemate Terry.

Survivors include two sons, James W. Hartfield of Turlock, Calif., and William A. Hartfield of Simi Valley, Calif.; one daughter, Edna Elaine Thomas of Murfreesboro; one sister, Jeanne T. Culbreth of Nashville; nine grandchildren and three great-grandchildren.

She was a retired legal secretary and a member of the Church of Christ.

Visitation with the family will be from 4 to 7 today at Woodfin Chapel in Smyrna.

TERRY, Mary Louise—The widow of the late W.H. Terry. Sunday, June 1, 1975 at a local infirmary. Age 84. Survived by 2 daughters, Mrs. Louise Hartfield & Mrs. Merwin (Jeanne) Culberth, both of NashYille; 8 grandchildren; 6 great grandchildren. The remains are at Ellis Funeral Home, 2627 Nolensville Rd. where services will be conducted Tuesday afternoon at 2:00 P.M. by Bro. Harold Balur, and Bro. Leo Snow. Active pallbeares: Vestal Rakes, Bob Hughs, Don Sentell, Melford Todd, Dr. Seth Cooper, J. B. Benham. Honorary pallbeares: Ricky Pendleton, Phillip Odom, P.O. Shumate, Buford Shumate, Dr. Jimmy Hayes, Members of the Mens Bible Class at Concord Church of Christ. Interment Mt. Olivet Cemetery. ELLIS FUNERAL HOME. Directors.

IN LOVING MEMORY

William H. Terry

Services for William Henry Terry, 80, of 390 Coventry Drive, retired railroad conductor, will be at 11 a.m. Monday at Cosmospolitan Funeral Home.

Eugene Peden and Harold Baker, ministers of Lawrence Avenue Church of Christ, will officiate. Burial will be in Mt. Olivet Cemetery.

Mr. Terry died Friday at his home of a heart condition.

A native of Shelbyville, he was son of the late Nathaniel and Sarah Jane Terry, and received his education in Bedford County public schools. He moved to Nashville during his early 20s.

He was conductor on the N.C. & St. L. Railroad's "Dixie Flyer" for 54 years. He retired in 1960.

On April 14, 1915, he married the former Miss Louise Shumate of Nashville, who survives.

Mr. Terry was a member of the Lawrence Avenue Church of Christ. He was also member of the Brotherhood of Railroad Trainmen and the brotherhood of Railroad Conductors.

Other survivors are two daughters, Mrs. H. W. Hartfield, Peoria, Ill. and Mrs. Mervin Culberth, Tampa, Fla.; seven grandchildren; and three great-grandchildren.

You are not forgotten loved one
Nor will you ever be
As long as life and memory last
We will remember thee.

We miss you now, our hearts are sore
As time goes by, we miss you more.
Your loving smile, your gentle face
No one can fill your vacant place.

Died Friday, April 30, 1965

Will of Lance Hartfield

I, Lance Hartfield, declare this to be my will and revoke all former Wills and Codicils.

I am a widow.

I have the following children:
James Warren Hartfield, an adult.
Edna Elaine Thomas, an adult
William Arthur Hartfield, an adult.

I nominate my son, James Warren Hartfield, to act as executor of this Will. If my son is unable or unwilling to act, I nominate my daughter, Edna Elaine Thomas to act as co-executor. No bond shall be required of any executor of my Will.

I give my real property, commonly known as Parcel 60D-66 355, Lot No. 6 of Section 2, Hamblen County, Tennessee, commonly known as 390 Country Drive, Morristown, Tennessee, to my daughter Edna Elaine Thomas.

If my daughter, Edna Elaine Thomas, fails to survive me then this property shall go in equal shares to my sons, James Warren Hartfield and William Arthur Hartfield.

Will of Laura Warfield Page 2

shall go to my granddaughter, Pamela Jean Thomas

I give the residue of my estate in equal shares to my children who survive me.

Executed this 16th day of November 1984 at Canoga Park, County of Los Angeles California

Laura Warfield

TENNESSEE DEPARTMENT OF REVENUE

Exhibit D

05/04/2001
Estate of Mary Louise Terry
C/O David J. Waynick
211 Donelson Pk, Suite 2, P. O. Box 148056
Nashville, TN 37214

Account Type: Inheritance
Account No: [redacted]-8319
Date of Death: 06/01/75
County: Knox (47)
Social Security No: [redacted]-8319

A sworn return for inheritance tax has been filed with this department by the representative of the above estate.

As provided in Section 67-8-420, Tennessee Code Annotated, this receipt or certificate authorizes the court of the county in which such estate was administered to permit a final settlement or accounting by the estate representative.

The liability shown to be due and paid to the State of Tennessee is denoted below:

Inheritance Tax	$00.00
Estate Tax	00.00
Interest	00.00
Penalty	00.00
Total	$00.00

DETACH BELOW AND RETAIN FOR YOUR RECORDS

TENNESSEE DEPARTMENT OF REVENUE

05/04/2001
Estate of Mary Louise Terry
C/O David J. Waynick
211 Donelson Pk, Suite 2, P. O. Box 148056
Nashville, TN 37214

Account Type: Inheritance
Account No: [redacted]-8319
Date of Death: 06/01/75
County: Knox (47)
Social Security No: [redacted]-8319

A sworn return for inheritance tax has been filed with this department by the representative of the above estate.
As provided in Section 67-8-420, Tennessee Code Annotated, this receipt or certificate authorizes the court of the county in which such estate was administered to permit a final settlement or accounting by the estate representative.
The liability shown to be due and paid to the State of Tennessee is denoted below:

Inheritance Tax	$00.00
Estate Tax	00.00
Interest	00.00
Penalty	00.00
Total	$00.00