V-C-6 JRR/aw

Davidson County WILL
Recvd: 09/20/01 15:15 7pgs
Fees:37.00 Taxes:0.00
20010920-0102160

Last Will and Testament

of

043-15-0
145.00

BERTHA LEE GARDNER

I, BERTHA LEE GARDNER, of Madison, Davidson County, Tennessee, being of sound mind and disposing memory, do hereby make, publish and declare this to be my Last Will and Testament, hereby revoking any and all other Wills heretofore made by me.

I.

I direct that all of my just debts, my funeral expenses, and the costs of administration of my estate be paid as soon as practicable after my death. My Executrix, in her sole discretion, may pay from my domicillary estate all or any portion of the costs of ancillary administration and similar proceedings in other jurisdictions.

I direct that there shall be paid out of my residual estate, without apportionment, all estate, inheritance, succession and other taxes, together with any penalty thereon, assessed by reason of my death, imposed by the government of the United States, or any State or territory thereof, or by any foreign government or political subdivision thereof in respect of all property required to be included in my gross estate for estate or like tax purposes by any of such governments, whether the property passes under this Will or otherwise, including property over which I have a taxable power of appointment, without contribution by any recipient of any such property.

Any real property which I may own at the time of my death is to be part of my probate estate and treated as forming part of my personal estate for administration purposes, unless otherwise provided in this my Last Will and Testament.

Bertha L Gardner

I further direct that any obligations of mine secured by mortgage on any real estate, whether owned by me jointly or individually, or by pledge of or lien against any of my personal property or life insurance be considered in full as obligations of my estate.

II.

I bequeath to my grandson, VANOY L. GARDNER, in fee, all tangible personal property owned by me at the time of my death.

III.

I devise to my grandson, VANOY L. GARDNER, if he shall survive me, my residence located in Madison, Davidson County, Tennessee, and commonly known as 1010 Providence Pass, Madison, Davidson County, Tennessee. If, at the time of my death I shall no longer be using said property as my residence, then this devise shall be void and of no effect; provided, however, that if at the time of my death I shall own and be using any other real estate as my residence, then and in such event I devise such other real estate to my said grandson, VANOY L. GARDNER, if he shall survive me.

IV.

I will, devise and bequeath all of the rest, residue and remainder of the property which I may own at the time of my death, real, personal and mixed, tangible and intangible, of whatsoever nature and wheresoever situated, including all property which I may acquire or become entitled to after the execution of this Will, including all lapsed legacies and devises, all life insurance payable to my estate, and income collected during the period of administration of my estate, to my grandson, VANOY L. GARDNER.

V.

I nominate and appoint VIOLA KAY of 3821 Woodward Drive, Nashville, Davidson County, Tennessee, to be Executrix of this my Last Will and Testament and direct that no bond be required for the faithful performance of her duties.

Bertha Lee Gardner

I hereby grant to my Executrix the continuing, absolute, discretionary power to deal with any property, real or personal, held in my estate as freely as I might in the handling of my own affairs. Such power may be exercised independently and without the prior or subsequent approval of any Court or judicial authority; and no person dealing with the Executrix shall be required to inquire into the propriety of any of their actions. Without in any way limiting the generality of the foregoing, I hereby grant to my Executrix, the following specific powers and authority in addition to and not in substitution of, powers conferred by law:

1. To compromise, settle or adjust any claim or demand by or against my estate and to agree to any rescission or modification of any contract or agreement;

2. To retain any security or other property owned by me at the time of my death, so long as such retention appears advisable; to exchange any such security or property for other securities or properties and to retain such items received in exchange; my Executor may presume that I have confidence in the securities owned by me at the time of my death and therefore no sale thereof need be made solely in order to diversify investments;

3. To sell, exchange, assign, transfer and convey any security or property, real or personal, held in my estate, at public or private sale, at such time and price and upon such terms and conditions, including credit, as may be determined;

4. To invest and re-invest in such stocks, bonds and other securities and properties as may be deemed advisable, including stock and unsecured obligations, undivided interests, interests in investment trusts, mutual funds, legal and discretionary common trust funds, leases, and property which is outside my domicile, all without diversification as to kind or amount, without being restricted in any way by any statute or court decision regulating or limiting investments by fiduciaries;

Bertha L Gardner

5. To register and carry any property in my fiduciary's own name or in the name of the nominee of my fiduciary or to hold said property unregistered, but without thereby increasing or decreasing the liability of my fiduciary;

6. To borrow money upon such terms and conditions as may be determined and to mortgage and pledge estate and trust assets as security for the repayment thereof;

7. To lease any real property for such term or terms and upon such conditions, rentals and in such manner as may be deemed advisable, with or without privilege of purchase, and any lease so made shall be valid and binding for the full term thereof; to insure against fire or other risks; to make repairs, replacements and improvements, structural or otherwise, to any such real estate; and to dedicate same to public use and to grant easements as may be deemed proper;

8. Whenever required or permitted, to divide and distribute my estate and to make such division or distribution in money or in kind, or partly in money and partly in kind; and to exercise all powers herein conferred; and

9. To employ accountants, attorneys and such agents as may be deemed advisable and to pay reasonable compensation for their services and to charge same to, or apportion same between, income and principal as may be deemed proper.

IN WITNESS WHEREOF, I have hereunto set my hand to this my Last Will and Testament, on this the 7th day of November 1985, and pursuant to Chapter 568 of the 1972 Public Acts of the General Assembly of the State of Tennessee, I request the attesting witnesses to make the Affidavit hereinafter set out.

Bertha L Gardner

BERTHA LEE GARDNER

Signed, sealed, published and declared by the Testatrix, BERTHA LEE GARDNER, 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.

Charles R Taylor of 1021 new Providence Lane Madison Tenn.

Billie J Hancock of 1018 New Providence Lane Madison, Tn. 37115

STATE OF TENNESSEE

COUNTY OF DAVIDSON

Lillie D Hancock and Charles R Taylor, after first being duly sworn or affirming, make oath or affirm that the foregoing Last Will and Testament was signed by BERTHA LEE GARDNER, as and for and at that time acknowledged, published and declared by her to be her Last Will and Testament, in the sight and presence of us, the undersigned, who, at her request and in her sight and presence and in the sight and presence of each other, have subscribed our names as attesting witnesses on the 7th day of November 1985; and we further make oath or affirm that the Testatrix was of sound mind and disposing memory, and not acting under the fraud, menace or undue influence of any person, and was more than eighteen (18) years of age; and that each of the attesting witnesses is more than eighteen (18) years of age.

Lillie D Hancock

Charles R Taylor

Sworn or affirmed and subscribed
to before me this 7th day of
November 1985.

M. Kelly Lisk, Jr. Notary Public

My commission expires My Commission Expires Jan. 10, 1989

STATE OF TENNESSEE
Office of Vital Records

9701694

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 97 010035

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last): BERTHA LEE GARDNER
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): March 20, 1997
4. SOCIAL SECURITY NUMBER: [redacted]6639
5a. AGE LAST BIRTHDAY (Years): 80
5b. UNDER 1 YEAR (Mos.)
5c. UNDER 1 DAY (Hours, Min.)
6. DATE OF BIRTH (Month, Day, Year): Mar 16, 1917
7. BIRTHPLACE (City and State or Foreign Country): Booneville, MS
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 2 No
8a. PLACE OF DEATH (Check only one): HOSPITAL 1 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): Vanderbilt Medical Center 081
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)
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.): Housewife
12b. KIND OF BUSINESS/INDUSTRY: Home Maker
13a. RESIDENCE-STATE: TN
13b. COUNTY: DAvidson
13c. CITY, TOWN OR LOCATION: Madison
13d. STREET AND NUMBER OR RURAL LOCATION: 1010 New Providence Pass
13e. INSIDE CITY LIMITS? 1 Yes
13f. ZIP CODE: 37115
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No. If yes, specify Cuban, Mexican, Puerto Rican, etc.): No
15. RACE-American Indian, Black, White, etc. (Specify): Black
16. DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (0-12): 03; College (1-4 or 5+)
17. FATHER'S NAME (First, Middle, Last): James Roper
18. MOTHER'S NAME (First, Middle, Maiden Surname): Savannah Rogers

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Linda A. Gardner
19b. RELATIONSHIP TO DECEASED: Daughter
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 311-A Cleveland St., Nashville, TN 37206

DISPOSITION

20a. METHOD OF DISPOSITION: 1 Burial
20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): Greenwood Cemetery
20c. LOCATION-City or Town, State: Nashville, TN
21a. SIGNATURE OF FUNERAL DIRECTOR: Richard A. Lewis
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 3633
21c. SIGNATURE OF EMBALMER: Delmas Bogus
21d. LICENSE NUMBER OF EMBALMER: 3687
22a. NAME AND ADDRESS OF FUNERAL HOME: LEWIS & WRIGHT FUNERAL DIRECTORS, 2500 Clarksville Hwy., Nashville, TN 37208
22b. LICENSE NUMBER OF FUNERAL HOME: 0812

REGISTRAR

23. REGISTRAR'S SIGNATURE: Paula Jaylor
24. DATE FILED (Month, Day, Year): April 3, 1997

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: James V Fleming MD (PHYSICIAN)
25b. LICENSE NUMBER: TN 28182
25c. DATE SIGNED (Month, Day, Year): 04/01/97
25a. 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
25b. LICENSE NUMBER
25c. DATE SIGNED (Month, Day, Year)
27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print)

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

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. Enter only one cause on each line.

SEE INSTRUCTIONS ON OTHER SIDE

IMMEDIATE CAUSE (Final disease or condition resulting in death): a. arrythmia, (cardiac arrest) — Approximate Interval Between Onset and Death: minutes
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. atrial fibrillation, atrioventricular block — months
DUE TO (OR AS A CONSEQUENCE OF):
c. congest heart failure, hypertension — > 7 years
DUE TO (OR AS A CONSEQUENCE OF):
d.

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I: diabetes mellitus, h/o myocardial infarction, h/o pneumonia, poss h/o stroke
29a. WAS AN AUTOPSY PERFORMED? 2 No
29b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? 2 No
30. MANNER OF DEATH: 1 Natural
31a. DATE OF INJURY (Month, Day, Year)
31b. TIME OF INJURY
31c. INJURY AT WORK? 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 #:

PH-1659
REV 2-93

PDA 1398

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

Sep-20-2001
Date Issued

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

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD