This Instrument Prepared Without Title Search, From Information Provided By The Parties By:

Robert H. Stratton
Attorney at Law
4811 Lebanon Road, Suite 209
Hermitage, Tennessee 37076
(615) 902-0311

Owner(s): **Johnnie Marie Davis; and**
Patricia Ann Weatherford
as Tenants in Common.

Map & Parcel No.:
Map: 44-15
Parcel: P-154

Send Tax Notice To: **Johnnie Marie Davis; and**
Patricia Ann Weatherford
811 Lawrence Street
Old Hickory, Tennessee 37138

Davidson County AFFIDAVIT
Recvd: 05/29/03 13:21 11pgs
Fees:57.00 Taxes:0.00
20030529-0072528

AFFIDAVIT OF INHERITANCE (REAL ESTATE)

Come now the undersigned, who, after being duly cautioned and sworn, depose and say as follows:

MARY KATE BARNTHSON, a single person, the owner in fee simple of the following described real estate Land in Davidson County, Tennessee:

Being Lot No. 263 of Section "A" on the Plan of Village of Old Hickory, as of record in Book 1424, Page 68 Register's Office for said County.

SAID Lot No. 263 fronts 82 feet on the easterly side of Lawrence Street and extends back between parallel lines 88.5 feet to a dead line.

BEING the same property conveyed to Charles William Barnthson and wife, Mary Kate Barnthson, by deed, from Willie Ray Smith and wife, Ethel J. Smith of record in Book 92, Page 122, Register's Office for Davidson County, Tennessee.

Being the same property conveyed by Quitclaim Deed from Charles William Barnthson and wife, Mary Kate Barnthson, to Trustee, Phillip Robinson, and from Phillip Robinson, Trustee to Mary Kate Barnthson, a single person, of record in Book 7401, Page 378, Register's Office for Davidson County, Tennessee.

And, being subject to all other easements, restrictions or conditions of record in the Register's Office for Davidson County, Tennessee.

This is improved property known as: 811 Lawrence Street, Old Hickory, Tennessee 37138

died on August 17th, 2002, as a citizen and resident of Davidson County, Tennessee.

That no survey was made and that the description herein is the same description as in the prior deed of record. This deed was prepared without benefit of a Title Examination and therefore the preparer makes no certification as to the validity of the title thereto

The undersigned received the following described interest in the decedent's real estate described above pursuant to the terms of decedent's Last Will and Testament, a copy of which is attached hereto as **Exhibit "A"**,. The undersigned parties are the nieces and, pursuant to the Last Will and Testament of decedent, heirs of the residuary of decedent's estate and are entitled

to receive, as tenants in common, Decedent's fee simple interest in said real property. [A copy of the death certificate for Decedent, Mary Kate Barnthson is attached hereto and incorporated herein as **Exhibit "B"**].

The Tennessee Inheritance Tax waiver has been received and is attached hereto and incorporated herein as **Exhibit "C".**

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

****

State of Tennessee)
County of Davidson)

BY: Johnnie Marie Davis
Johnnie Marie Davis, Co-Executrix of the Estate of Mary Kate Barnthson.

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared, **Johnnie Marie Davis,** the within named bargainor, with whomI am personally acquainted or proved to me on the basis of satisfactory evidence to be the person described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that he executed the foregoing instrument for the purposes therein contained as his free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal at my office in said Hendersonville, on this the 12th day of March, 2003.

BY: _____
Notary Public

My Commission Expires:
5/24/03

ROBERT H. STRATTON NOTARY PUBLIC AT LARGE WILSON CO. TENN.

****

State of Tennessee)
County of Davidson)

BY: Patricia Anne Weatherford
Patricia Ann Weatherford, Co-Executrix of the Estate of Mary Kate Barnthson. .

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared **Patricia Ann Weatherford** the within named bargainor, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that she executed the foregoing instrument for the purposes therein contained as her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal at my office in said Hendersonville, on this the 12th day of March, 2003.

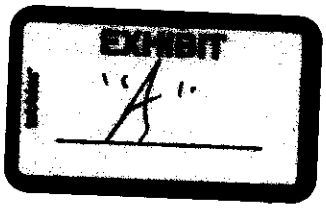
BY: _____
Notary Public

My Commission Expires:
5/24/03

ROBERT H. STRATTON NOTARY PUBLIC AT LARGE WILSON CO.

****

PREPARED BY:
Robert H. Stratton
Attorney At Law
4811 Lebanon Road, Suite 209
Hermitage, Tennessee 37076
(615) 902-0311



LAST WILL AND TESTAMENT

OF

Mary Kate Barnthson

COPY

I, **Mary Kate Barnthson,** currently residing in the City of Old Hickory, County of Davidson, State of Tennessee, being of lawful age, sound mind and memory, and under no restraint, do hereby publish and declare this to be my **Last Will and Testament**, revoking all prior wills and codicils that I have made.

A PERSONAL NOTE TO MY FAMILY

I trust that the formal terminology in this will and the absence of personal messages will not cause you to doubt my love and affection for you. You are well aware of my love and affection. Because a will is a legal instrument, the purpose of which is to dispose of property, I do not feel that it is an appropriate place for extensive personal messages. Suffice it to say that I love each of you and that my last thoughts are of you.

ARTICLE I

All estate and inheritance taxes (including interest and penalties, if any), together with all administration expenses, payable in any jurisdiction by reason of my death (including those taxes and expenses payable with respect to assets which do not pass under this will) shall be paid out of and charged generally against the principal of my residuary estate without apportionment. I waive any right of reimbursement for, recovery of, or contribution toward the payment of those taxes and administration expenses, except my personal representative shall, to the maximum extent

permitted by law, seek reimbursement for, recovery of, or contribution toward the payment of federal or state estate tax attributable to property in which I have a qualifying income interest for life, over which I have power of appointment, or which is included in my gross estate by reason of Section 2036 of the Internal Revenue Code of 1986, as from time to time amended ("Code"), and which tax is not otherwise paid or payable.

ARTICLE II

I give the sum of Five Thousand and 00/00 Dollars ($5,000.00) to my niece, **Rebecca Anne Taylor**, presently of Linden, Tennessee, if she shall be living on the thirtieth day after the date of my death. This gift of $5,000.00 may come from cash or investment accounts, if any, or from the sale of real or personal property of my estate.

ARTICLE III

I forgive completely a certain loan made to my niece Johnnie Marie Davis and her husband Norman Davis and secured by a mortgage and deed of trust on a certain parcel of real estate known as 118 South Graycroft Avenue, Madison, Tennessee 37115 and direct my personal representative to, as soon as practicable after my death, mark the loan as paid in full and to take all steps necessary and proper to clear title to the property known as 118 South Graycroft Avenue, Madison, Tennessee 37115 of any lien or indebtedness to me or my estate.

ARTICLE IV

I give to my niece **Johnnie Marie Davis**, all of my right, title and interest in and to the two (2) cemetery lots owned by me and located at the Hermitage Memorial Gardens in Hermitage, Tennessee in the "Garden of Faith", and identified as Lot # 112A, spaces # 1 and # 4.

ARTICLE V

A. I give my tangible personal property that I own at my death, including any household furniture and furnishing, vessels, motor vehicles, books, pictures, jewelry, art objects, hobby equipment and collections, wearing apparel, and other articles of household or personal use or

ornament , to be distributed in equal shares, share and share alike, to my nieces, **Patricia Ann Weatherford and Johnnie Marie Davis**; to be divided in such manner as they shall agree or, if they shall fail to agree upon a division within six months after the date of my death, as my personal representative(s) shall determine; provided, however, that if any beneficiary hereunder has not reached legal age, or been emancipated by marriage or otherwise, under the law of the jurisdiction in which that beneficiary is domiciled at the time set for distribution under this paragraph, then the person having legal custody of the beneficiary (i) shall represent the beneficiary in any division of such property, (ii) may give a binding receipt for and hold the beneficiary's share for his or her benefit, (iii) may sell any part or all of the share, and (iv) shall deliver the share or sale proceeds to the beneficiary before or when the beneficiary reaches legal age, as such person considers advisable.

B. All costs of safeguarding, insuring, packing, and storing my tangible personal property before its distribution and of delivering each item to the place of residence of the beneficiary of that item shall be deemed to be expenses of administration of my estate.

ARTICLE VI

I give my residuary estate, which shall not include any property over which I have a power of appointment, in equal shares, share and share alike, to my nieces, **Patricia Ann Weatherford and Johnnie Marie Davis**.

ARTICLE VII

A. I name my niece, **Patricia Ann Weatherford** and my niece, **Johnnie Marie Davis,** as co-personal representative of this will. If either my niece, **Patricia Ann Weatherford, or my niece, Johnnie Marie Davis** , fails or ceases to act as personal representative, then the other shall serve alone as personal representative of this Will. If both my niece, **Patricia Ann Weatherford and my niece, Johnnie Marie Davis,** fail or cease to act as personal representative, then I name my niece, **Rebecca Anne Taylor**, personal representative of this Will. No personal representative of this will shall be required to furnish bond or other security as personal representative.

B. If the appointment of a personal representative of my estate is necessary or desirable in any jurisdiction in which no personal representative herein named is able or willing to act, I appoint as my personal representative in that jurisdiction such person (who may be an officer or employee or a corporate personal representative then acting) or corporation as may be designated in an instrument signed by my spouse, if legally competent, otherwise by my then acting personal representative, that personal representative to serve without bond, or if bond is required, without surety thereon, and to have all the powers and discretion with respect to my estate in that jurisdiction that are set forth or referred to in paragraph C of this Article, to be exercised without court order. As used in this will, the terms "personal representatives" and "personal representative" designate any court-appointed fiduciaries or fiduciary of my estate from time to time qualified and acting in any jurisdiction.

C. In addition to all powers granted by law, my personal representatives shall have all the powers and discretion with respect to my estate during administration that are set forth and referred to with respect to the trustee hereunder (including the power to sell real estate or personal property at public or private sale for any purpose and to hold title to property in the name of a nominee), to be exercised without court order.

D. I empower my personal representative(s) (i) to make such elections under the tax laws as my personal representative(s) deem advisable, including election to create qualified terminable interest property for both estate and generation-skipping tax purposes or for estate tax purposes alone, and (ii) to allocate the unused portion, if any, of my GST exemption (as defined in this paragraph) to any property with respect to which I am the transferor for generation-skipping tax purposes (irrespective of whether such property passes under this will) in such manner as my personal representative(s) deem advisable, in each case without regard to the relative interests of the beneficiaries; however, my personal representative(s) shall not make adjustments between principal and income, or in the interest of the beneficiaries, to compensate for the effects of such elections and allocation. Any decision made by my personal representative(s) with respect to the exercise of any tax election or the allocation of my GST exemption shall be binding and conclusive on all persons. As used in this paragraph, the "GST exemption" means the exemption from generation-skipping tax allowed under section 2631 of the Code.

E. I direct that my personal representative be excused from filing an inventory, interim accounting or final accounting with the Court having jurisdiction over the administration of my estate.

F. I direct that the compensation of the corporate personal representative, if any, shall be in accordance with its published schedule of fees as in effect at the time the services are rendered.

ARTICLE VIII

A. If any beneficiary under this will in any manner, directly or indirectly, contests or attacks the validity of this will or any disposition under this will, by filing suit against my personal representative or otherwise, then any share or interest given to that beneficiary under the provisions of this will is hereby revoked and shall be disposed of in the same manner as if that contesting beneficiary and all descendants of that contesting beneficiary had predeceased me.

B. It is my intention that any gift to any beneficiary named herein shall lapse if said beneficiary shall predecease me.

I signed this will on the 31st **day of** July, **2001.**

BY: Mary Kate Barnthson
Mary Kate Barnthson

On the date last above written, we saw **Mary Kate Barnthson**, in our presence, sign the foregoing instrument at its end. She then declared it to be her last will and testament, and requested us to act as witnesses to it. We then, in her presence and in the presence of each other, signed our names as attesting witnesses, believing her at all times herein mentioned to be of sound mind and memory and not acting under constraint of any kind.

BY: Frances W. Kunkel
Residing at: 807 Lawrence Street
Old Hickory TN 37138

BY: Mrs. Margaret N. Pouch
Residing at: 900 Lawrence St.
Old Hickory, Tn. 37138

BY: _____
Residing at: _____
_____

STATE OF TENNESSEE)
COUNTY OF Davidson)

Frances W. Kunkel, _____, and MARGARET PARCH, being severally duly sworn, depose and say that:

We are acquainted with **Mary Kate Barnthson**, who executed this annexed Will, consisting of 7 typewritten pages, dated the 31st day of July, 2001,on that date at Hermitage, Tennessee, by subscribing her name at the end thereof in the presence and sight of each of us.

At the time of subscribing said Will, **Mary Kate Barnthson**, declared the instrument so subscribed by her to be her Last Will and Testament, and we thereupon signed our names as witnesses at the end of said instrument at her request and in her presence and sight, and in the presence and sight of each other.

At the time of executing said Will, **Mary Kate Barnthson**, was over the age of eighteen years and in our opinion was of sound mind, memory and understanding and not under any restraint or in any respect incompetent to make a Will.

This affidavit is made at the request of said **Mary Kate Barnthson**.

The annexed Will was examined by the undersigned at the time this affidavit was made.

BY: Frances W. Kimbel

BY: Mrs. Margaret N. Pouch

BY: _____

SWORN TO AND SUBSCRIBED before me, this 31st day of July, 2001.

BY: _____
NOTARY PUBLIC

My Commission Expires:
5/25/2003

ROBERT H. STRATTON NOTARY PUBLIC AT LARGE WILSON CO. TENN.

7 KB

METROPOLITAN GOVERNMENT OF NASHVILLE & DAVIDSON COUNTY
Office of Vital Records

0204756

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER

TYPE/PRINT IN PERMANENT BLACK INK. FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last): Mary Kate Barnthon
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): August 17, 2002
4. SOCIAL SECURITY NUMBER (of Deceased): 413-28-0124
5a. AGE-LAST BIRTHDAY (Years): 79
5b. UNDER 1 YEAR MOS. / 5c. UNDER 1 DAY HOURS / MIN.
6. DATE OF BIRTH (Month, Day, Year): July 13, 1923
7. BIRTHPLACE (City and State or Foreign Country): Atoka, TN
8a. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 Yes 2 X No
8b. PLACE OF DEATH (Check only one): 1 X Inpatient 2 ER/Outpatient 3 DOA 4 Nursing Home 5 Residence 6 Other (Specify)
9a. FACILITY NAME (If not institution, give street and number): Summitt Medical Center
9b. CITY, TOWN, OR LOCATION OF DEATH: Hermitage
9c. 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.): Beautician
12b. KIND OF BUSINESS/INDUSTRY: Haircare
13a. RESIDENCE - STATE: TN
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Old Hickory
13d. STREET AND NUMBER OR RURAL LOCATION: 811 Lawrence street
13e. INSIDE CITY LIMITS? 1 X Yes 2 No
13f. ZIP CODE: 37138
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No. If yes, specify Cuban, Mexican, Puerto Rican, etc.) 1 Yes 2 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+): 2

PARENTS

17. FATHER'S NAME (First, Middle, Last): John Mathis
18. MOTHER'S NAME (First, Middle, Maiden Surname): Lizzie Devore

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Mrs. Maude Mathis
19b. RELATIONSHIP TO DECEASED: Sister-in-law
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 1416 East Cedar Lane, Madison, TN 37115

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): Hermitage Memorial Gardens
20c. LOCATION - City or Town, State: Hermitage, TN
21a. SIGNATURE OF FUNERAL DIRECTOR: Edward Abercrombie
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 5386
21c. SIGNATURE OF EMBALMER: Edward Abercrombie
21d. LICENSE NUMBER OF EMBALMER: 5387
22a. NAME AND ADDRESS OF FUNERAL HOME: Phillips-Robinson Company, 2707 Gallatin Road, Nashville, TN 37216
22b. LICENSE NUMBER OF FUNERAL HOME: 331

REGISTRAR

23. REGISTRAR'S SIGNATURE: [signature]
24. DATE FILED (Month, Day, Year): August 28 2002

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 X SIGNATURE AND TITLE OF PHYSICIAN: Stanley Bodnar
25b. LICENSE NUMBER: MD 7196
25c. DATE SIGNED (Month, Day, Year): 08-26-2002
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 MED. EXAMINER / ME ADDITIONAL CERTIFICATE MUST COMPLETE AND SIGN IF DEATH WAS NOT WITNESSED BY A PHYSICIAN OR ME

27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print): Dr. Stanley Bodnar 3515 Central Pike, Nashville, TN 37216

CAUSE OF DEATH

28. PART I. Enter only causes, not modes, 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.
Immediate cause (Final disease or condition resulting in death): a. Acute Myocardial Infarction
Due to (or as a consequence of): b. Hypertensive + Atherosclerotic Vascular Disease
Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST: Due to (or as a consequence of): c.
Due to (or as a consequence of): d.
Approximate Interval: Onset to Death: a. Hours b. Days c. Days d. Years

SEE INSTRUCTIONS FOR OTHER MOS.

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I: Long History of Smoking, High Cholesterol, Strong Family Hx. of Diseases
29a. WAS AN AUTOPSY PERFORMED? 1 Yes X No
29b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? 1 Yes 2 No

30. MANNER OF DEATH: 1 X Natural 2 Accident 3 Suicide 4 Homicide 5 Pending Investigation 6 Could not be Determined
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)

Print/Edit REV: 2-93

Form No. _____ TDH, 1999

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 Metropolitan Government of Nashville and Davidson County. Alteration or erasure voids this certification.
Tennessee Code Annotated 68-3-101 et seq., Vital Records Act of 1977.

John P. Dunn
John P. Dunn
Local Registrar

08/29/02
Date Issued

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

CERTIFICATION OF VITAL RECORD

TENNESSEE DEPARTMENT OF REVENUE

INHERITANCE TAX RELEASE
FOR REAL OR PERSONAL PROPERTY

NOTICE: THIS DOCUMENT BECOMES AN OFFICIAL STATE RECORD WHEN COMPLETED. INFORMATION SHOULD BE TYPED OR PRINTED CLEARLY IN INK. COMPLETE A SEPARATE INHERITANCE TAX RELEASE FORM FOR EACH PARCEL OF REAL PROPERTY OR FOR EACH BANK OR CORPORATION.

NAME OF DECEDENT: Mary Kate Barnthson

COUNTY OF RESIDENCE: Davidson

SOCIAL SECURITY NUMBER: [redacted]-0124

APPLICATION:

ATTACHED: YES ✓ NO ___

ON FILE: YES ___ NO ___ IF SO DATE FILED ___

EXHIBIT C

The Department of Revenue hereby waives the issuance of notice required by Section 67-8-417, Tennessee Code Annotated and consents to the transfer of the property now in your custody, or standing on your records in the name of the captioned decedent.

DESCRIPTION OF PROPERTY (List only one)

81 Lawrence Street
Old Hickory, TN 37138

TENNESSEE DEPARTMENT OF REVENUE INHERITANCE TAX

Johnnie Marie Davis Patricia Anne Weatherford

Representative of the Estate
(Not valid unless signed)

RETAIN PINK COPY FOR YOUR RECORDS. RETURN WHITE AND YELLOW COPIES TO THE TENNESSEE DEPARTMENT OF REVENUE, 500 DEADERICK ST., NASHVILLE, TN 37242.

Amy Green

DEPARTMENTAL USE ONLY

For Commissioner of Revenue
(By Tax Audit Manager - Audit Division)

MAR 0 5 2003

Date approved

Inheritance-Gift Tax Section

ROBERT H. STRATTON
ATTORNEY AT LAW
4811 LEBANON RD., SUITE 209
HERMITAGE, TN 37076
(615) 902-0311

Release will be mailed to address to the left. Type or print clearly in ink the complete address (include street number and zip code.) Address should be contained within the space provided.

Rev. 6-00.