Prepared by:
Law Office of David J. Waynick
P.O. Box 148058
Nashville, TN 37214

Davidson County AFFIDAVIT
Recvd: 11/05/04 09:50 14pgs
Fees:72.00 Taxes:0.00
20041105-0133516

Owner -&- Send Tax Notice to:
c/o Michael E. Poston
2408 Kimberly Drive
Nashville, TN 37214-1418

T.C.A. § 30-2-712 Map & Parcel No. 73-07-29

AFFIDAVIT OF DEVISE/INHERITANCE (REAL ESTATE)

STATE OF TENNESSEE
COUNTY OF DAVIDSON.

The undersigned, being duly sworn, depose and say:

MARIE HUDSON POSTON, a resident of Seminole County, State of Florida, who died August 2, 2002, as evidenced by a copy of the death certificate attached as *EXHIBIT A*, held a fee simple interest in the following described real estate:

> A certain tract or parcel of land in Davidson County, Tenneessee, described as follows to wit:
>
> Being Lot No. 321 on the Plan of Sunset View, Section 6, as of record in Book 2900, pages 54 and 55, Register's Office for Said County.
>
> Said Lot No. 321 fronts 105 feet on the northerly side of Kimberly Road and extends back 233.7 feet on the westerly line and 248.9 feet on the easterly line to a dead line, measuring 93.3 feet thereon.
>
> This conveyance is made subject to a 10 foot easement for public utilities along northerly and rear part of the westerly line of premises. 90 foot building setback line from Kimberly Road, and conditions of owners certificate, as shown on plan of record in Book 2900, page 54 and 55, said Register's Office and to restrictive covenants contained in a instrument executed by Herman McCallum, dated November 12, 1959, filed December 1, 1959, and recorded in Book 2995, page 413, said Register's Office.
>
> Being a part of the same property conveyed to Edgar L. Poston and wife, Marie H. Poston, by Warranty Deed from James M. Foster and wife, Polly T. Foster, of record in Book 4013, page 705, Register's Office for Davidson County, Tennessee. Edgar L. Poston having predeceased Marie H. Poston.
>
> This improved property known as 2408 Kimberly Drive, Nashville, TN

The Tennessee Inheritance Tax Non-Taxable Certificate has been received being number 440787946, a copy of which is attached as *EXHIBIT B.*

The undersigned each received the following interest 31% to Jerry W. Poston, 23% to Michael E. Poston, 23% to Raymond L. Poston, 23% to Sherra M. Schwartau, each a one-fourth (1/4) undivided interest as tenants in common, in the real estate described above by virtue of the un-probated will of the decedent. A copy of the un-probated will is attached as *EXHIBIT C.*

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

T.C.A. § 67-4-409(a)(3)(D) exempts this instrument from tax and T.C.A. § 67-4-409(a)(5) further provides the valuation oath is unnecessary, the affidavit being used as evidence transfer of title to the property to a beneficiary/devisee.

MICHAEL E. POSTON, Bargainor
(23% undivided interest as tenant in common)

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared MICHAEL E. POSTON, 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 he executed the foregoing Affidavit of Devise/Inheritance (Real Estate) 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 County, on this 2nd day of ~~July~~ August 2004.

Notary Public
My Commission Expires:

CHRISTIE J. LANNOM
NOTARY PUBLIC AT LARGE
WILSON COUNTY, TENN.

My Commission Expires
June 26, 2005

JERRY W. POSTON, Bargainor
(31% undivided interest as tenant in common)

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared JERRY W. POSTON, 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 he executed the foregoing Affidavit of Devise/Inheritance (Real Estate) 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 County, on this 2nd day of August 2004.

Notary Public
My Commission Expires:

CHRISTIE J. LANNOM
NOTARY PUBLIC AT LARGE
WILSON COUNTY, TENN.
My Commission Expires
June 26, 2005

RAYMOND L. POSTON, Bargainor
(23% undivided interest as tenant in common)

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared RAYMOND L. POSTON, 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 he executed the foregoing Affidavit of Devise/Inheritance (Real Estate) 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 County, on this 21st day of July 2004.

WILLIAMSON CO., TENN. NOTARY PUBLIC AT LARGE

Notary Public
My Commission Expires: 4/23/2005

SHERRA M. SCHWARTAU, Bargainor
(23% undivided interest as tenant in common)

STATE OF FLORIDA
COUNTY OF PINELLAS

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared SHERRA M. SCHWARTAU, 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 Affidavit of Devise/Inheritance (Real Estate) 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 County, on this 27 day of July 2004.

Notary Public
My Commission Expires:
7/30/2005

BETTY G. O'HEARN
Comm# DD0045799
Expires 7/30/2005
Bonded thru (800)4...
Florida Notary Ass...

STATE OF FLORIDA

OFFICE of VITAL STATISTICS

CERTIFIED COPY

CERTIFICATE OF DEATH
FLORIDA

EXHIBIT "A"

LOCAL FILE NO.

DECEDENT'S NAME (First)	(Middle)	(Last)	2. SEX
MARIE	HUDSON	POSTON	female

3. DATE OF DEATH (Month, Day, Year)	4. SOCIAL SECURITY NUMBER	5a. AGE-Last Birthday (Years)	5b. UNDER 1 YEAR (Months)	5c. UNDER 1 DAY (Hours / Minutes)
August 2, 2002	410-96-2162	83		

6. DATE OF BIRTH (Month, Day, Year)	7. BIRTHPLACE (City and State or Foreign Country)	7a. WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes or No)
March 23, 1919	Nashville, Tennessee	no

8a. PLACE OF DEATH (Check only one; see instructions on other side): HOSPITAL — Inpatient — ER/Outpatient — DOA — OTHER — Nursing Home — Residence — X Other (Specify): Daughter's home

8b. FACILITY NAME (If not institution, give street and number)	8d. CITY, TOWN, OR LOCATION OF DEATH	8e. COUNTY OF DEATH	8f. INSIDE CITY LIMITS?
1311 Pine St.	Seminole	Pinellas	Yes

9. DECEDENT'S USUAL OCCUPATION	10a. KIND OF BUSINESS/INDUSTRY	11. MARITAL STATUS — Married, Never Married, Widowed, Divorced (Specify)	12. SURVIVING SPOUSE (If wife, give maiden name)
Homemaker	own home	Widowed	

13a. RESIDENCE — STATE	13b. COUNTY	13c. CITY, TOWN, OR LOCATION	13d. STREET AND NUMBER
Tennessee	Davidson	Donelson	2412 Kimberly Dr.

13e. INSIDE CITY LIMITS? (Yes or No)	13f. ZIP CODE	14. WAS DECEDENT OF HISPANIC ORIGIN OR RACE (Specify No or Yes — If yes, specify Mexican, Puerto Rican, Cuban, etc.) No — Yes	15. RACE — American Indian, Black, White, etc.	16. DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12) / College (1-4 or 5+)
yes	37214	Specify:	Specify: white	12

17. FATHER'S NAME (First, Middle, Last)	18. MOTHER'S NAME (First, Middle, Maiden Surname)
James O. Hudson	Corrie Peek

19a. INFORMANT'S NAME (Type or Print)	19b. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code)
Jerry Poston	830 Idlewild Dr., Madison, Tennessee 37115

20a. METHOD OF DISPOSITION	20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place)	20c. LOCATION — City, Town, State
Burial — Cremation — Donation — Other (Specify) — X Removal from State	Spring Hill Cemetery	Madison, Tennessee

21a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH	21b. LICENSEE NUMBER (of Licensee)	21c. NAME AND ADDRESS OF FACILITY
William Tedder	1326	International Funeral Home 4617 73rd.Ave.N. Pinellas Park,Fl.33781

To be Completed by Certifying Physician

22a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) and manner as stated. (Signature and Title) Richard C. Eidd

22b. DATE SIGNED (Mo., Day, Yr.) 8-3-02

22c. HOUR OF DEATH 6:

22d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)

To be Completed by 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.

22e. DATE SIGNED (Mo., Day, Yr.)

22f. HOUR OF DEATH

22g. MEDICAL EXAMINER'S CASE #

23. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, MEDICAL EXAMINER) (Type or Print)
Richard C. Eidd, D.O., 13020 Park Blvd., Seminole, Florida 33776

24a. SUBREGISTRAR - SIGNATURE AND DATE

24b. LOCAL REGISTRAR - SIGNATURE: Joyce Beasley

24c. DATE REGISTERED: August 8, 2002

25. 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. Cerebrovascular Accident	1 minute
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): b. Cardiac Arrest	minutes
	DUE TO (OR AS A CONSEQUENCE OF): c. Arteriosclerotic Heart Disease	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.

26. WAS AUTOPSY PERFORMED (Yes or No)	27. WERE AUTOPSY FINDINGS CONSIDERED TO COMPLETE CAUSE OF DEATH? (Yes or No)	28. CASE REFERRED TO MEDICAL EXAMINER? (Yes or No)
no		no

29. IF FEMALE: WAS THERE A PREGNANCY IN THE PAST 3 MONTHS? Yes — No	30a. IF SURGERY IS MENTIONED IN PART I or II, ENTER CONDITION FOR WHICH IT WAS PERFORMED	30b. DATE OF SURGERY (Mo., Day, Year)

31. PROBABLE MANNER OF DEATH (Specify) Natural, accident, suicide, homicide, or undetermined	32a. DATE OF INJURY (Month, Day, Year)	32b. TIME OF INJURY	32c. INJURY AT WORK? (Yes or No)	32d. DESCRIBE HOW INJURY OCCURRED
Natural		M		

32e. PLACE OF INJURY — At home, farm, street, factory, etc. (Specify)	32f. LOCATION (Street and Number or Rural Route Number, City or Town, State)

THIS IS A CERTIFIED TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE

Issued: August 8, 2002

Chief Deputy Registrar, Pinellas County — State Registrar

WARNING: THIS DOCUMENT IS PRINTED OR PHOTOCOPIED ON SECURITY PAPER AND CONTAINS A WATERMARK. DO NOT ACCEPT WITHOUT SEEING THE WATERMARK. THE SEAL OF THE STATE OF FLORIDA. DO NOT ACCEPT WITHOUT SEEING THE RAISED SEAL. THE DOCUMENT FACE CONTAINS A MULTI-COLORED BACKGROUND. THE BACK CONTAINS SPECIAL LINES WITH TEXT AND SEALS.

FLORIDA DEPARTMENT OF HEALTH

CERTIFICATION OF VITAL RECORD

VOID IF ALTERED OR ERASED

VOID IF ALTERED OR ERASED

N0019001

6603670041023

EXHIBIT "B"

TENNESSEE DEPARTMENT OF REVENUE

Inheritance Tax Closing Letter (This is not a bill for tax due)

October 26, 2004

ESTATE OF MARIE H POSTON
ATTN: DAVID J WAYNICK
211 DONELSON PIKE STE 2
NASHVILLE TN 37214-2914

Account Type:	INHERIT TX
Account No.:	440787946
Date of Death:	August 2, 2002
County:	DAVIDSON
Social Security No.:	[redacted]-2162

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, as denoted in this closure letter, has been paid to the State of Tennessee. This is not a bill:

Inheritance Tax:	$0.00
Estate Tax:	$0.00
Interest:	$0.00
Penalty:	$0.00
Total:	$0.00

DETACH BELOW AND RETAIN FOR YOUR RECORDS

TENNESSEE DEPARTMENT OF REVENUE

ESTATE OF MARIE H POSTON
ATTN: DAVID J WAYNICK
211 DONELSON PIKE STE 2
NASHVILLE, TN 37214-2914

October 26, 2004	
Account Type:	INHERIT TX
Account No.:	440787946
Date of Death:	August 2, 2002
County:	DAVIDSON
Social Security No.:	[redacted]-2162

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The liability, as denoted in this closure letter, has been paid to the State of Tennessee. This is not a bill:

Inheritance Tax:	$0.00
Estate Tax:	$0.00
Interest:	$0.00
Penalty:	$0.00
Total:	$0.00

RV-N0019001

EXHIBIT "C"

IMPORTANT NOTES

BEFORE YOU SIGN: Read your will carefully. Is everything printed as you intended? Do you understand the meaning of every word?

WHILE YOU SIGN: For your will to be valid you must be of sound mind and of the age specified by your state. This is almost always 18.

Your will should be witnessed by three witnesses, even though only two are legally required in most states. The witnesses should be in your and each other's presence when you sign the will. The witnesses need not read your will.

You must say to the witnesses that you intend this document to be your will. Make sure each page is numbered and dated; then write your initials on one of the blank lines where indicated. Then sign the last page in the presence of the witnesses. Use exactly the form of your name printed on the will. The witnesses should state that they realize you intend this to be your will. They should then, in your presence, initial each page, near the line you did, sign the last page in the space indicated for witnesses, and fill in their addresses.

AFTER YOU SIGN: Keep your will in a safe place, where it can be readily found. You may make photocopies – for example, to give to your executor. However, only the signed original is legally valid and can be probated.

If there are major changes in your life, you should make and sign a new will and have it witnessed. Destroy the original of your old will and all copies. Changes that make it wise for you to make a new will include: having or adopting a child, moving to another state, the death of anyone named in your will, a change of marital status, and a significant change in the property you own.

KEEP UP TO DATE: Fill out the WillMaker registration card in the manual and send it to Nolo Press at the address below. If you do not have a copy of the manual include $69.95 for a full WillMaker package.

WillMaker 5.0, Copyright 1993 by Nolo Press.
950 Parker St., Berkeley, CA 94710
(510) 549-1976

Date: Sunday, May 26, 1996 Time: 19:51:16

Will of Marie H. Poston

PERSONAL INFORMATION

I, Marie H. Poston, a resident of Tennessee, Davidson County, declare that this is my will. My Social Security Number is [redacted]2162.

REVOCATION OF PREVIOUS WILLS

FIRST: I revoke all wills and codicils that I have previously made.

CHILDREN

SECOND: I have the following child(ren) now living: Raymond L. Poston and Jerry W. Poston and Michael E. Poston and Sherra M. Schwartau.

FAILURE TO LEAVE PROPERTY

THIRD: If I do not leave property in this will to one or more of the children or grandchildren whom I have identified above, my failure to do so is intentional.

DEFINITIONS

FOURTH: As used in this will, the term "specific bequest" refers to a gift of specifically identified property that I leave in this will. The term "residuary estate" refers to all property subject to this will that is not passed by specific bequest or that is specifically left to or becomes a part of my residuary estate when a beneficiary of a specific bequest fails to survive me. The term "residuary bequest" refers to a gift of all or a portion of my residuary estate.

SPECIFIC BEQUESTS OF PROPERTY

FIFTH: I give the real estate, excluding personal contents, located at 2408 Kimberly Dr. Nashville, TN to Raymond L. Poston (23%), and Jerry W. Poston (31%) and Michael E. Poston (23%) and Sherra M. Schwartau (23%). However, if one of these beneficiaries does not survive me, that beneficiary's living children shall take his or her share equally. If there are no living children, the surviving beneficiaries shall take the share equally. If there are no surviving beneficiaries, the property shall go to my residuary estate.

SIXTH: I give one Janssen piano with Lowrey organ to Raymond L. Poston. However, if Raymond L. Poston does not survive me, the property shall go to Michael E. Poston.

SEVENTH: I give the Gibson guitar model # 1.7 with sunburst finish to Raymond L. Poston. However, if Raymond L. Poston does not survive me, the property shall go to Michael E. Poston.

EIGHTH: I give the gold necklace watch and chain serial # 878130 that once belonged to my mother, Corrie P. Hudson to Raymond L. Poston. However, if Raymond L. Poston does not survive me, the property shall go to Jerry W. Poston.

NINTH: I give the wooden pendulum clock to Jerry W. Poston. However, if Jerry W. Poston does not survive me, the property shall go to Michael E. Poston.

TENTH: I give the Murry 8hp. riding mower to Jerry W. Poston. However,

if Jerry W. Poston does not survive me, the property shall go to Michael E. Poston.

ELEVENTH: I give the Sony 19" color television to Raymond L. Poston. However, if Raymond L. Poston does not survive me, the property shall go to Sherra M. Schwartau.

TWELFTH: I give the bell collection to Sherra M. Schwartau. However, if Sherra M. Schwartau does not survive me, the property shall go to Michael E. Poston.

THIRTEENTH: I give the photograph of my mother and gold antique frame to Michael E. Poston. However, if Michael E. Poston does not survive me, the living children of Michael E. Poston shall take the property. If there are no living children, the property shall go to the living children of Michael E. Poston. If they do not survive, it shall go to the living grandchildren. If there are none, it shall go to Sherra M. Schwartau or her heirs..

FOURTEENTH: I give the oak dresser/mirror that once belonged to my mother, Corrie P. Hudson to Sherra M. Schwartau. However, if Sherra M. Schwartau does not survive me, the property shall go to Ashley M. Schwartau.

FIFTEENTH: I give the Alabaster decorative scale to Michael E. Poston. However, if one of these beneficiaries does not survive me, that beneficiary's living children shall take his or her share equally. If there are no living children, the surviving beneficiaries shall take the share equally. If there are no surviving beneficiaries, the property shall go to Jon M. Poston.

SIXTEENTH: I give the Sony 27 inch TV and Toshiba VCR to Michael E. Poston. However, if Michael E. Poston does not survive me, the property shall go to Jerry W. Poston.

RESIDUARY ESTATE

SEVENTEENTH: I give my residuary estate to Raymond L. Poston (25%) and Jerry W. Poston (25%) and Michael E. Poston (25%) and Sherra M. Schwartau (25%). However, if any one of these beneficiaries does not survive me, that beneficiary's living children shall take his or her share. If there are no living children, the surviving beneficiaries shall take the share.

ENCUMBRANCES AND LIENS

EIGHTEENTH: All personal and real property I give in a specific or residuary bequest shall pass subject to any encumbrances or liens on the property.

SURVIVORSHIP PERIOD

NINETEENTH: When this will states that a beneficiary must survive me for the purpose of receiving a specific bequest or residuary bequest, he or she must survive me by 45 days.

DIVISION OF BEQUESTS

TWENTIETH: Any specific bequest or residuary bequest made in this will to two or more beneficiaries shall be shared equally among them, unless unequal shares are specifically indicated.

PERSONAL REPRESENTATIVE

TWENTY-FIRST: I name Jerry W. Poston as my personal representative. If Jerry W. Poston for any reason does not qualify or ceases to act as personal representative, I name Michael E.Poston as my personal representative. No personal representative shall be required to post bond.

PERSONAL REPRESENTATIVE'S POWERS

TWENTY-SECOND: I direct my personal representative to take all actions legally permissible to have the probate of my will done as simply and as free of court supervision as possible under the laws of the state having jurisdiction over this will, including filing a petition in the appropriate court for the independent administration of my estate.

TWENTY-THIRD: I grant to my personal representative the following powers, to be exercised as he or she deems to be in the best interests of my estate:

1) To retain property without liability for loss or depreciation.
2) To dispose of property by public or private sale, or exchange, or otherwise, and receive and administer the proceeds as a part of my estate.
3) To vote stock, to exercise any option or privilege to convert bonds, notes, stocks or other securities belonging to my estate into other bonds, notes, stocks or other securities, and to exercise all other rights and privileges of a person owning similar property.
4) To lease any real property in my estate.
5) To abandon, adjust, arbitrate, compromise, sue on or defend and otherwise deal with and settle claims in favor of or against my estate.
6) To continue or participate in any business which is a part of my estate, and to incorporate, dissolve or otherwise change the form of organization of the business.

The powers, authority and discretion I grant to my personal representative are intended to be in addition to the powers, authority and discretion vested in him or her by operation of law by virtue of his or her office, and may be exercised as often as is deemed necessary or advisable, without application to or approval by any court.

PAYMENT OF DEBTS

TWENTY-FOURTH: Except for liens and encumbrances placed on property as security for the repayment of a loan or debt, I instruct my personal representative to pay all debts and expenses, as provided for by the laws of Tennessee.

PAYMENT OF TAXES

TWENTY-FIFTH: I instruct my personal representative to pay all estate and inheritance taxes assessed against property in my estate or against

my beneficiaries as provided for by the laws of Tennessee.

NO CONTEST PROVISION

TWENTY-SIXTH: If any beneficiary under this will contests this will or any of its provisions, any share or interest in my estate given to the contesting beneficiary under this will is revoked and shall be disposed of in the same manner as if that contesting beneficiary had failed to survive me and left no living children.

SIGNATURE

I, Marie H. Poston, the testator, sign my name to this instrument, this 25th day of Sept, 1997, at Madison, Tn. I declare that I sign and execute this instrument as my last will, that I sign it willingly, and that I execute it as my free and voluntary act. I declare that I am of the age of majority or otherwise legally empowered to make a will, and under no constraint or undue influence.

Marie H. Poston
(Signed)

WITNESSES

We, the witnesses, sign our names to this instrument, and declare that the testator willingly signed and executed this instrument as the testator's last will.

Each of us, in the presence of the testator, and in the presence of each other, sign this will as witness to the testator's signing.

To the best of our knowledge, the testator is of the age of majority or otherwise legally empowered to make a will, is mentally competent and under no constraint or undue influence.

We declare under penalty of perjury that the foregoing is true and correct, this 25th day of Sept, 1997, at Madison, Tennessee.

Witness #1: Dillard Jones

Residing at: 414 S. Gallatin Rd Madison TN 37115

Witness #2: Carol Hoe

Residing at: 969 S. Gallatin Rd Madison Tn 37115

Witness #3: Karen Comer

Residing at: 969 S. Gallatin Rd. Madison TN 37115

INSTRUCTIONS ON USE OF SELF-PROVING AFFIDAVIT

Your state allows you to make your will self-proving. This means that a self-proving affidavit (a written statement under oath) is signed by you and your witnesses in front of a notary and then attached to your will.

Making a will self-proving has absolutely nothing to do with your will's legality. However, it may speed the admission of your will to probate after you die. This is especially true if none of your witnesses can be located at that time.

In short, while completing a self-proving affidavit is by no means essential, some people may want to go to the extra trouble it involves because in some circumstances it may make things easier for your personal representative.

If you wish to make your will self-proving, complete these steps:

1) Make sure that the Notary's signature lines print on the same page as the signature lines of the testator and witnesses. If they don't, try changing the print options to tight spacing and wider margins, and perhaps a smaller font, if necessary.

2) Sign and witness your will exactly as we suggest in Chapter 9 and in the instructions accompanying the will.

3) Either have a notary present at the will signing, or find a notary at a later time. Either way, you and at least two (preferably three) of your witnesses must personally appear before the notary and be prepared to identify yourselves.

4) Tell the notary that you want to make your will self-proving and ask whether he or she has a form for doing that. If so, use that form and follow the notary's instructions. (New Hampshire residents, note that, in your state, the affidavit is part of the will itself and comes right after the signature.)

5) If the notary doesn't have a form, use the one printed by WillMaker.

6) Put your name and your witnesses' names in the spaces indicated in the affidavit, and give it to the notary. He or she will have you and your witnesses swear to the truth of the statements in the affidavit (which basically are the same statements you used when the will itself was being signed and witnessed) and will then date and sign the affidavit and put his or her notary seal on it.

7) Staple the affidavit to your will. If you ever make a new will, you should also redo your affidavit.

REMINDER: Both you and your witnesses must sign the will as we direct in addition to signing this affidavit. The affidavit and will are to be treated as two separate documents.

AFFIDAVIT

State of: Tennessee

County of: Davidson

I, the undersigned, an officer authorized to administer oaths, certify that Marie H. Poston, the testator, and Debra B. Jenkins, Carolyn Hogan, and Karen Osment, the witnesses, whose names are signed to the attached or foregoing instrument and whose signatures appear below, having appeared together before me and having been first duly sworn, each then declared to me that:

1) the attached or foregoing instrument is the last will of the testator;
2) the testator willingly and voluntarily declared, signed and executed the will in the presence of the witnesses;
3) the witnesses signed the will upon request by the testator, in the presence and hearing of the testator, and in the presence of each other;
4) to the best knowledge of each witness the testator was, at that time of the signing, of the age of majority (or otherwise legally competent to make a will), of sound mind, and under no constraint or undue influence; and
5) each witness was and is competent, and was then 18 years of age or older.

Testator: Marie H. Poston

Witness: [illegible]

Witness: Carol Hogan

Witness: Karen Osment

Subscribed, sworn to and acknowledged before me by Marie H. Poston, the testator, and by Debra B. Jenkins, Carolyn Hogan and Karen Osment, witnesses, this 25th day of September, 1997.

Norma P. Nicholson
(Signed)

My Commission Expires 3-27-99