Davidson County AFFIDAVIT
Recvd: 03/08/06 14:59 7 pgs
Fees:37.00 Taxes:0.00
20060308-0027178

This instrument prepared by
Fred W. Beesley, Jr.
404 James Robertson Parkway #1720
Nashville, TN 37219-1510
Phone 615/244-0554
FAX 615/244-1229
E-mail: fwbeesley@comcast.net

New Owners:
Rosemary Mortimer & Viola Prosser
1718 Stokes Lane
Nashville, TN 37215

Map & Parcel: 117-7 56 (11707005700 from tax bill)
Property Address:
1718 Stokes Lane
Nashville, TN 37215:

Former Owner (Deceased):
Mary P. Mortimer
1718 Stokes Lane
Nashville, TN 37215

Send Tax Bills To:
Rosemary Mortimer & Viola Prosser
1718 Stokes Lane
Nashville, TN 37215

AFFIDAVIT OF HEIRSHIP

We, Rosemary Mortimer & Viola Prosser, after first being duly sworn, state as follows:

The above-referenced real property was owned by our mother, Mary P. Mortimer, of record on a Warranty Deed of record at Book 4908, Page 755, Register's Office for Davidson County, TN, and a copy of that Warranty Deed is here attached as Exhibit A.

Our mother continued to own this real property until her death on July 29, 2004; and a copy of our mother's Death Certificate is here attached as Exhibit B.

Our mother's only heirs were her three daughters, including the two of us and our sister, Maxine M. Townsend. Maxine predeceased our mother and died childless on December 20, 2003. A copy of Maxine's Death Certificate is here attached as Exhibit C.

We, Rosemary Mortimer and Viola Prosser, are the sole heirs of our mother, Mary P. Mortimer, and therefore under the laws of Tennessee we each now possess an undivided one-half interest as tenants in common in the said real property at 1718 Stokes Lane, Nashville, Davidson County, TN, and shown on the records of the Davidson County, TN Tax Assessor at Map 117-7, Parcel 56. This real estate at 1718 Stokes Lane is more completely described on our mother's Warranty Deed, of record at Book 4908, Page 755, Register's Office for Davidson County, TN, and here attached as Exhibit A.

Further Affiants saith not, this 7th day of March, 2006.

Rosemary Mortimer

Viola Prosser

Viola Prosser

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Sworn to and subscribed before me the undersigned, a Notary Public in the aforesaid County and State, the said Rosemary Mortimer and Viola Prosser, with whom I am personally acquainted, or who presented to me satisfactory proof of identity and who acknowledged that they had authority and that she executed the within instrument (Affidavit of Heirship) for the purposes therein contained.

Witness my hand and seal at office in Nashville, on this 7th day of March, 2006.

Nicole J. LeMay

Notary Public

NOTARY PUBLIC AT LARGE DAVIDSON COUNTY, TN

MY COMMISSION EXPIRES: November 24, 2007

My Commission Expires: _____

HEIRSHIPMortimer.201

Exhibit A

BOOK 4908 PAGE 755

FORM NO. WD-1

STATE OF TENNESSEE
COUNTY OF DAVIDSON

THE ACTUAL CONSIDERATION OR VALUE, WHICHEVER IS GREATER, FOR THIS TRANSFER IS $ 45,000.00

Affiant

SUBSCRIBED AND SWORN TO BEFORE ME, THIS THE 28th DAY OF April 19 75

Notary Public

MY COMMISSION EXPIRES: My Commission Expires July 19, 197

(AFFIX SEAL)

THIS INSTRUMENT WAS PREPARED BY
Geo. H. Cate, Atty., 510 Stahlman Bldg., Nashville, Tn. 37201
NAME ADDRESS

ADDRESS NEW OWNER (S) AS FOLLOWS:	SEND TAX BILLS TO:	MAP-PARCEL NUMBERS
Mary P. Mortimer (NAME)	(NAME)	117-7
1718 Stokes Lane (STREET ADDRESS OR ROUTE NUMBER)	(STREET ADDRESS)	56
Nashville Tn 37215 (CITY) (STATE) (P. O. ZIP)	(CITY) (STATE) (ZIP)	

Mail -7

FOR AND IN CONSIDERATION OF THE SUM OF TEN DOLLARS, CASH IN HAND PAID BY THE HEREINAFTER NAMED GRANTEES, AND OTHER GOOD AND VALUABLE CONSIDERATIONS, THE RECEIPT OF WHICH IS HEREBY ACKNOWLEDGED, WE, Virginia Cotten Parks and Mary Jane Cotten Bullington

HEREINAFTER CALLED THE GRANTORS, HAVE BARGAINED AND SOLD, AND BY THESE PRESENTS DO TRANSFER AND CONVEY UNTO Mary P. Mortimer

HEREINAFTER CALLED THE GRANTEES, her HEIRS AND ASSIGNS, A CERTAIN TRACT OR PARCEL OF LAND IN DAVIDSON COUNTY, STATE OF TENNESSEE, DESCRIBED AS FOLLOWS: TO-WIT:

Land in Davidson County, Tennessee, being Lot No. 13 of Block "A" on the Map of the Walter Stokes Homeplace Subdivision No. 1, of record in Book 974, Page 92, Register's Office for said County.

BEGINNING at a point in the northerly margin of Stokes Lane, 905 feet west of the westerly margin of Brightwood Avenue, as shown on the Plan of Belmont Terrace Annex No. 2, of record in Book 421, Page 182, said Register's Office; thence westerly with the northerly margin of Stokes Lane, 100 feet to a point; thence northerly and at right angles to the northerly margin of Stokes Lane, 206 feet to a point; thence easterly and parallel with the northerly margin of Stokes Lane, 100 feet to a point; thence southerly 206 feet to the point of beginning.

BEING the same property conveyed to William T. Cotten and wife, Ellen S. Cotten, by quitclaim deed from Geo. H. Cate, Trustee, of record in Book 4625, Page 228, Register's Office for Davidson County, Tennessee. The said William T. Cotten and Ellen S. Cotten, both having since died. The said William T. Cotten having predeceased the said Ellen S. Cotten. Said property vested in Virginia Cotten Parks and Mary Jane Cotten Bullington, Co-Executrices, with power of sale, under the will of Ellen S. Cotten, deceased, of record in Will Book 112, Page 258, Probate Court Clerk's Office for Davidson County, Tennessee.

Metro taxes have been prorated and are assumed by Grantee.

This is unimproved ( ) improved (X) property, known as 1718 Stokes Lane (House Number) (Street) Nashville, Tennessee 37215 (P. O. Address) (City or Town) (Postal Zip)

TO HAVE AND TO HOLD the said tract or parcel of land, with the appurtenances, estate, title and interest thereto belonging to the said GRANTEES, their heirs and assigns, forever; and we do covenant with the said GRANTEES that we are lawfully seized and possessed of said land in fee simple, have a good right to convey it, and the same is unencumbered, unless otherwise herein set out; and we do further covenant and bind ourselves, our heirs and representatives, to warrant and forever defend the title to the said land to the said GRANTEES, their heirs and assigns, against the lawful claims of all persons whomsoever. Wherever used, the singular number shall include the plural, the plural the singular, and the use of any gender shall be applicable to all genders.

Witness our hand s this 28th day of April, 1975

Virginia Cotten Parks

Mary Jane Cotten Bullington

STATE OF TENNESSEE
Davidson County

BOOK 4998 PAGE 756

Personally appeared before me, Geo. H. Cate, a Notary Public in and for said County and State, the within named Virginia Cotten Parks and Mary Jane Cotten Bullington

the bargainors, with whom I am personally acquainted, and who acknowledged that they executed the within instrument for the purposes therein contained. Witness my hand and official seal at Nashville, Tennessee, this 28th day of April, 1975

Commission expires My Commission Expires July 19 1976

Geo. H. Cate
Notary Public

STATE OF TENNESSEE
Davidson County

Before me, _____, a Notary Public within and for the State and County aforesaid, personally appeared _____ and _____ with whom I am personally acquainted and who upon (his oath) (their several oaths) acknowledged (himself) (themselves) to be the _____ and _____ respectively of the _____ the within named bargainor, a corporation, and that (he) (they) as such _____ and _____, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing the name of the corporation by the said _____ as such _____, and attesting the same by the said _____ as such _____

Witness my hand and official seal at office at _____ on this the _____ day of _____, 19__

My commission expires _____

_____
Notary Public

WARRANTY DEED

FROM Virginia Cotten Parks, et al

TO Mary P. Mortimer

C 96447

IDENTIF. REFERENCE

MAY 1 11 50 AM '75

REGISTER
DAVIDSON COUNTY, TENN.

Attorneys Title Company
Titles Guaranteed
NASHVILLE, TENN.

MAY-1[illegible] CONV 45,000.00

MAY-1[illegible] A* 117.00

MAY-1[illegible] A* .50

MAY-1[illegible] A* [illegible].00 * 121.50

STATE OF TENNESSEE
Office of Vital Records

Exhibit B

0404092

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2004 032856

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT

1. DECEDENT'S NAME (First Middle Last): Mary Jane Patton Mortimer
2. SEX: Female
3. DATE OF DEATH (Month Day Year): July 29, 2004
4. SOCIAL SECURITY NUMBER: 410-90-3500
5. AGE LAST BIRTHDAY: 92
6. DATE OF BIRTH (Month Day Year): Sept 16, 1911
7. BIRTHPLACE (City and State or Foreign Country): Centralia, MO
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 Yes 2 [XX] No
9. PLACE OF DEATH (Check only one): HOSPITAL 1 Inpatient 2 ER/Outpatient 3 DOA; OTHER 4 Nursing Home 5 [XX] Residence 6 Other (Specify)
9b. FACILITY NAME (If not institution, give street and number): 1718 Stokes Lane 410
9c. CITY, TOWN OR LOCATION OF DEATH: Nashville 094
9d. COUNTY OF DEATH: Davidson 19
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: Domestic
13a. RESIDENCE STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 1718 Stokes Lane
CENSUS TRACT
15a. INSIDE CITY LIMITS? 1 [XX] Yes 2 [ ] No
15f. ZIP CODE: 37215
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No. If yes, specify Cuban, Mexican, Puerto Rican, etc.) [ ] Yes [X] No
Specify Yes
16. RACE - American Indian, Black, White, etc. (Specify): White
17. 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)

PARENT

17. FATHER'S NAME (First Middle Last): Charles Patton
18. MOTHER'S NAME (First Middle Maiden Surname): Mabel Patton

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Rosemary Mortimer
19b. RELATIONSHIP TO DECEASED: Daughter
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 1718 Stokes Lane Nashville, TN 37215

DISPOSITION

20a. METHOD OF DISPOSITION: 1 [XX] Burial 2 [ ] Cremation 3 [ ] Removal from State 4 [ ] Donation 5 [ ] Other (Specify)
20b. PLACE OF DISPOSITION (Name of cemetery, crematory or other place): Harpeth Hills Memory Gardens
20c. LOCATION (City or Town, State): Nashville, TN 37221
21a. SIGNATURE OF FUNERAL DIRECTOR: Heather Saunders
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 5055
21c. SIGNATURE OF EMBALMER: No Embalming
21d. LICENSE NUMBER OF EMBALMER: ----
22a. NAME AND ADDRESS OF FUNERAL HOME: Harpeth Hills Funeral Home 9090 Highway 100, Nashville, TN 37221
22b. LICENSE NUMBER OF FUNERAL HOME: 849

REGISTRAR

23. REGISTRAR'S SIGNATURE: Sharon L. Brown
24. DATE FILED (Month Day Year): August 3, 2004

CERTIFIER

25a. PHYSICIAN: To the best of my knowledge, death occurred at the date and place and due to the cause(s) and manner as stated. 1 [X] SIGNATURE AND TITLE OF PHYSICIAN: MD
25b. LICENSE NUMBER: 17373
25c. DATE SIGNED (Month Day Year): August 3, 2004
26a. MEDICAL EXAMINER: On the basis of examination and/or investigation, in my opinion, death occurred at the date 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

27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print): Dr David Spigel 250 25th Ave No Ste 100, Nashville, TN 37203 320-5090

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.

Sharon M. Leinbach
STATE REGISTRAR

Date Issued Feb-02-2006

GREAT SEAL OF THE STATE OF TENNESSEE XVI AGRICULTURE COMMERCE 1796

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD

STATE OF TENNESSEE
Office of Vital Records

Exh C

0307389 — TENNESSEE DEPARTMENT OF HEALTH — CERTIFICATE OF DEATH — STATE FILE NUMBER 2003 055331

PRINT IN BLACK INK FOR ... HANDBOOK

DECEDENT

1 DECEDENT'S NAME (First Middle Last): Maxine M Townsend
2 SEX: female
3 DATE OF DEATH (Month Day Year): December 20, 2003
4 SOCIAL SECURITY NUMBER: [redacted]-6203
4a AGE LAST BIRTHDAY (Years): 60
4b UNDER 1 YEAR Months / Days
4c UNDER 1 DAY Hours / Min
6 DATE OF BIRTH (Month Day Year): June 1, 1943
7 BIRTHPLACE (City and State or Foreign Country): Nashville, Tennessee
8 WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 Yes 2 X No
8a PLACE OF DEATH (Check only one): HOSPITAL 1 Inpatient 2 ER/Outpatient 3 DOA; 4 Nursing Home 5 Residence 6 Other (Specify): 1710 Patterson Street
9b FACILITY NAME (If not institution give street and number): Alive Hospice Residence 930
9c CITY TOWN OR LOCATION OF DEATH: Nashville 094
9d COUNTY OF DEATH: Davidson 19
10 MARITAL STATUS (Married, Never Married, Widowed, Divorced (Specify)): Divorced
11 SURVIVING SPOUSE (If wife give maiden name): n/a
12a DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.): Librarian
12b KIND OF BUSINESS/INDUSTRY: Denver Public Library
13a RESIDENCE STATE: Tennessee
13b COUNTY: Davidson
13c CITY TOWN OR LOCATION: Nashville
13d STREET AND NUMBER OR RURAL LOCATION: 1718 Stokes Lane
CENSUS TRACT
13e INSIDE CITY LIMITS? 1 X Yes 2 No
13f ZIP CODE: 37215
14 WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No. If Yes specify Cuban, Mexican, Puerto Rican, etc.) Yes 0 X No
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+): 5

PARENTS

17 FATHER'S NAME (First Middle Last): Max Finley Mortimer
18 MOTHER'S NAME (First Middle Maiden Surname): Mary Patton

INFORMANT

19a INFORMANT'S NAME (Type/Print): Mary Mortimer
19b RELATIONSHIP TO DECEASED: mother
19c MAILING ADDRESS (Street and Number or Rural Route Number City or Town State Zip Code): 1718 Stokes Lane, Nashville, Tn 37215

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): Harpeth Hills Funeral Home
20c LOCATION City or Town State: Nashville, Tennessee
21a SIGNATURE OF FUNERAL DIRECTOR: Heather Heather
21b LICENSE NUMBER OF FUNERAL DIRECTOR: 5050
21c SIGNATURE OF EMBALMER: none
21d LICENSE NUMBER OF EMBALMER: n/a
22a NAME AND ADDRESS OF FUNERAL HOME: Harpeth Hills Funeral Home, 9090 Hwy 100, Nashville, Tn 37221
22b LICENSE NUMBER OF FUNERAL HOME: 849

REGISTRAR

23 REGISTRAR'S SIGNATURE: [signature]
24 DATE FILED (Month Day Year): December 31, 2003

CERTIFIER

25a PHYSICIAN To the best of my knowledge death occurred at the date and place and due to the cause(s) and manner as stated
1 X SIGNATURE AND TITLE OF PHYSICIAN: Hospice Charles Bernstein MD Physician
25b LICENSE NUMBER: 37847
25c DATE SIGNED (Month Day Year): 12/29/03
26a MEDICAL EXAMINER On the basis of examination and/or investigation in my opinion death occurred at the date 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

27 NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print): Dr C-Bernstein MD, 1710 Patterson Street, Nashville, Tn 37203

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.

Sharon M. Leinbach
STATE REGISTRAR

Date Issued Feb-02-2006

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD

SEVENTH CIRCUIT COURT OF DAVIDSON COUNTY, TENNESSEE

LETTERS TESTAMENTARY

06P378

To ROSEMARY MORTIMER and VIOLA PROSSER :

It appearing to the Court that MARY JANE PATTON MORTIMER has died leaving a written will, in which you are appointed Co-Executrixs, which has been duly approved by the Court; and you having been qualified according to law, and it having been ordered by said Court that Letters Testamentary issue to you.

These are, therefore, to empower you, the said ROSEMARY MORTIMER and VIOLA PROSSER to enter upon the execution of said will, and take into your possession all of the property, and to make, within sixty days from this date, a perfect inventory thereof, and make due collection for all debts, and after paying all the just demands against the Testator, and settling up the business according to law, you will pay over and deliver the property and effects that may remain in your hands, and do all other things that may be required, according to the provisions of the said will and the laws of the land.

Witness, Richard R. Rooker, Clerk of the Probate Court, at office, this March 07, 2006 .

Richard R. Rooker, Clerk

Tommy King

RICHARD R. ROOKER CIRCUIT COURT CLERK

STATE OF TENNESSEE
DAVIDSON COUNTY

I, Richard R. Rooker, Clerk of the Probate Court of said County, do hereby certify that the foregoing is a true and perfect copy of LETTERS TESTAMENTARY, issued to ROSEMARY MORTIMER and VIOLA PROSSER, Co-Executrixs of the estate of MARY JANE PATTON MORTIMER deceased, and I do further certify that ROSEMARY MORTIMER and VIOLA PROSSER are still acting Co-Executrixs of the estate of MARY JANE PATTON MORTIMER, and acts as such are entitled to full faith and credit, as appears from the records in my office at Nashville, Tennessee.

Witness my hand and official seal, at this office, this the 7TH day of March, 2006.

Richard R. Rooker, Clerk

Tommy King

RICHARD R. ROOKER CIRCUIT COURT CLERK