Davidson County DEEDWARR
Recvd: 06/08/07 12:58 3 pgs
Fees:17.00 Taxes:0.00

20070608-0068932

ADDRESS OF NEW OWNER AS FOLLOWS
Name: Dorothy Oliphant
Street Address: 4406 Park Avenue
City,State Zip: Nashville, TN 37209
Order No. 61-00776151776150

MI-2051498

SPACE ABOVE THIS LINE F RECORDER'S USE

WARRANTY DEED

PLEASE RETURN TO REC. DEPT.
Lender's First Choice
3850 Royal Avenue
Simi Valley, CA 93063

STATE OF TENNESSEE
COUNTY OF DAVIDSON

THE ACTUAL CONSIDERATION OR VALUE, WHICHEVER IS GREATER, FOR THIS TRANSFER IS **$10.00** **(AFFIANT)**

Subscribed and sworn to before me this 9 day of May, 2007.

Notary Public

My Commission Expires: 7-21-07

PEGGY L. NIEMANN STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON CO., TN

My Commision Expires JULY 21, 2007

FOR AND IN CONSIDERATION OF the sum of Ten and 00/100 Dollars cash in hand paid, and other good and valuable consideration, the receipt of which is hereby acknowledged, the undersigned, **DOROTHY OLIPHANT, SURVIVING SPOUSE OF ARLIE I. OLIPHANT WHO DIED ON 12-28-1980,** hereinafter referred to as "Grantors", have this day bargained and sold and do hereby transfer and convey unto **DOROTHY OLIPHANT, A WIDOW,** hereinafter referred to as "Grantee" their heirs and assigns, forever, that certain parcel of real estate located in DAVIDSON County, State of Tennessee, and being described as follows, to-wit:

LOT NO. 307 OF BLOCK "A" ON THE PLAN OF THE CHARLOTTE PARK COMPANY'S FIRST ADDITION, AS RECORD IN BOOK 57, PAGE 103, REGISTER'S OFFICE OF SAID COUNTY. SAID LOT NO. 307 FRONTS 50 FEET ON THE NORTHERLY SIDE OF PARK AVENUE, FORMERLY 1ST AVENUE, AND RUNS BACK BETWEEN PARALLEL LINES 150 FEET TO AN ALLEY. BEING THE SAME PROPERTY CONVEYED TO ARLIE I. OLIPHANT AND WIFE, DOROTHY OLIPHANT, ARLIE I OLIPHANT HAVING SINCE DIED, BY DEED FROM DOROTHY FIELDS FRAZER, OF RECORD IN BOOK 4734, PAGE 680 (RECORDED 08/07/73)

TO HAVE AND TO HOLD said real estate, together with all of the appurtenances, estate and title thereunto belonging, unto the said Grantee(s), their heirs and assigns, forever.

The undersigned covenant with the said Grantees that they are lawfully seized and possessed of said parcel of real estate, and that they have a good right to convey the same.

The undersigned further covenant and bind themselves, their heirs and assigns, to forever warrant and defend the title to said real estate to the Grantees, their heirs and assigns, against the lawful claims of all person, whomsoever.

Witness our hands this 9 day of May, 2007.

DOROTHY OLIPHANT

STATE OF TENNESSEE

COUNTY OF DAVIDSON } S.S.

On this 9 day of May, 2007, before me, personally appeared DOROTHY OLIPHANT, to me known to be the person described in and who executed the foregoing instrument, and who acknowledged the execution of same to be his free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and notarial seal.

Notary Public
My Commission Expires: 7-21-07

PEGGY L. NIEMANN STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON CO., TN

My Commision Expires JULY 21, 2007

THIS INSTRUMENT PREPARED BY AND SEND NEW TAX BILLS TO:
DOROTHY OLIPHANT

MAP / PARCEL NUMBERS: 09116003200

ADDRESS NEW OWNER:
DOROTHY OLIPHANT
4406 PARK AVENUE

SEND TAX BILLS TO:
DOROTHY OLIPHANT
4406 PARK AVENUE

EXHIBIT "A"

CERTAIN REAL ESTATE IN DAVIDSON COUNTY, TENNESSEE, AS FOLLOWS:

LAND IN DAVIDSON COUNTY, TENNESSEE, BEING LOT NO. 307 OF BLOCK "A" ON THE PLAN OF THE CHARLOTTE PARK COMPANY'S FIRST ADDITION, AS RECORD IN BOOK 57, PAGE 103, REGISTER'S OFFICE OF SAID COUNTY.

SAID LOT NO. 307 FRONTS 50 FEET ON THE NORTHERLY SIDE OF PARK AVENUE, FORMERLY 1ST AVENUE, AND RUNS BACK BETWEEN PARALLEL LINES 150 FEET TO AN ALLEY.

FOR INFORMATIONAL PURPOSES ONLY: THE APN IS SHOWN BY THE COUNTY ASSESSOR AS 09116003200; SOURCE OF TITLE IS BOOK 4734, PAGE 680 (RECORDED 08/07/73)

METROPOLITAN GOVERNMENT OF
NASHVILLE & DAVIDSON COUNTY
Office of Vital Records

CERTIFICATE OF DEATH

TENNESSEE DEPARTMENT OF PUBLIC HEALTH
VITAL RECORDS

005994

BIRTH NO. _____ STATE FILE NO. _____

1. DECEASED—NAME: Arlie Issiah Oliphant
2. DATE OF DEATH (MONTH, DAY, YEAR): 12-28-1980
3a. AGE—LAST BIRTHDAY (YEARS): 58
3b. UNDER 1 YEAR: MOS. / DAYS
3c. UNDER 1 DAY: HOURS / MIN.
4. DATE OF BIRTH (MONTH, DAY, YEAR): 4-28-1922
5. RACE (WHITE, BLACK, AMERICAN INDIAN, ETC.): white
6. SEX: male
7a. COUNTY OF DEATH: Davidson
7b. CITY, TOWN OR LOCATION: Nashville
7c. INSIDE CITY LIMITS (SPECIFY YES OR NO): yes
7d. HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, SPECIFY PRIVATE RESIDENCE, WARDROBE, STREET, ETC.): General Hospital
7e. IF HOSP. OR INST.: Inpatient, Emergency Room, Inpatient (Specify)
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): married
11. SURVIVING SPOUSE (IF WIFE, GIVE MAIDEN NAME): Dorothy Archey
12a. SOCIAL SECURITY NUMBER: 412-24-5572
12b. SERVICE IN ARMED FORCES (SPECIFY WAR OR DATES OF SERVICE):
12c. USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED): Equipment Operator
13. KIND OF BUSINESS OR INDUSTRY: Metro Government
14a. RESIDENCE—STATE: Tenn.
14b. COUNTY: Davidson
14c. CITY, TOWN, OR LOCATION: Nashville
14d. STREET AND NUMBER: 4406 Park Ave.
14e. INSIDE CITY LIMITS (SPECIFY YES OR NO): yes
14f. CENSUS TRACT NO.:
15. FATHER—NAME: Henry Oliphant
16. MOTHER—MAIDEN NAME: Ruth White
17. INFORMANT—NAME: Dorothy Oliphant
MAILING ADDRESS: 4406 Park Ave. Nashville, Tn. 37209
18a. BURIAL, CREMATION, REMOVAL, OTHER (SPECIFY): Burial
18b. DATE (MONTH, DAY, YEAR): 12-30-1980
18c. CEMETERY OR CREMATORY—NAME: Harpeth Hills Cem.
18d. LOCATION—CITY OR TOWN: Nashville
18e. STATE: Tenn.
19a. FUNERAL DIRECTOR (SIGNATURE): Boyd D. Ruffin
19b. LICENSE NO.: 2027
19c. EMBALMER (SIGNATURE): John A Gupton
19d. LICENSE NO.: 1067
19e. FUNERAL HOME—NAME AND ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP): Pettus-Owen & Wood, Inc. Nashville, Tn.
19f. REGISTRAR'S SIGNATURE: Esther D Groh
19g. DATE RECEIVED BY LOCAL REGISTRAR: 1-13-81
20. PHYSICIAN—I CERTIFY THAT THE DEATH OCCURRED AT THE PLACE, ON THE DATE, AND DUE TO THE CAUSE(S) STATED. SIGNATURE: George B. Thiel M.D. DEGREE: M.D. DATE SIGNED (MONTH, DAY, YEAR): 1/6/81
21a. MEDICAL EXAMINER—ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR THE INVESTIGATION, DEATH OCCURRED ON THE DATE AND DUE TO THE CAUSE(S) STATED. SIGNATURE: _____ TITLE: _____ DATE SIGNED (MONTH, DAY, YEAR): _____
21b. CERTIFIER—NAME (TYPE OR PRINT): George B. Thiel MD
MAILING ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP): Metropol. Nash. Gen. Hosp., Nash. Tn
22. PART I. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)
(a) IMMEDIATE CAUSE: Bronchopneumonia, severe, bilateral — INTERVAL BETWEEN ONSET AND DEATH: month
(b) DUE TO, OR AS A CONSEQUENCE OF:
(c)
CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST
(d)
PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)
Lupus, microndular cirrhosis
28. AUTOPSY (YES OR NO): Yes
29. ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY):
29a. DATE OF INJURY (MONTH, DAY, YEAR):
29b. HOUR:
29c. DESCRIBE HOW INJURY OCCURRED:
29d. INJURY AT WORK (SPECIFY YES OR NO):
29e. PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG, ETC. (SPECIFY):
29f. LOCATION—STREET OR R.F.D. NO., CITY OR TOWN, STATE:

DECEASED
PRINT IN ENT BLACK INK.
ESIDENCE WHERE DE-LIVED. IF DEATH OC-IN INSTITUTION, GIVE CE BEFORE ADMIS-
PARENTS AND INFORMANT
REQUIRED PRIOR TO RTATION OF BODY BY CARRIER OR RE-OM STATE.
DISPOSITION
CERTIFIER
H NOT ATTENDED BY IN, AUTHORIZED OFFI-IN HERE. ANY PHYSI-L MEDICAL EXAMINER NS CERTIFICATE MUST E AND SIGN MEDICAL CATION WITHIN 72 POWER OF SIGNATURE BE DELEGATED.
CAUSE

RM NO. 56.10
1-78 CRC

ECOMES A LEGAL WHEN PROPERLY EXE-ND FILED.

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.

[redacted]

Tonya Y Foreman
Local Registrar

Date Issued APR 25 2007

CERTIFICATION OF VITAL RECORD