THIS INSTRUMENT PREPARED BY:
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Davidson County DEEDWARR
Recvd: 10/07/08 09:55 4 pgs
Fees:23.00 Taxes:277.50
20081007-0101639

NEW OWNER:	Send Tax Bill To:	Map & Parcel:
KENNETH EATON and wife, TONI EATON 200 Church Street Nashville, TN 37201	Same	148-05-0-141.00

WARRANTY DEED

For and in consideration of the sum of ten dollars, cash in hand paid by the hereinafter named grantees, and other good and sufficient and valuable considerations, the receipt of which are hereby acknowledged, WILMA JEAN PAYNE*, hereinafter called the Grantor, has bargained and sold by these presents does transfer and convey unto KENNETH EATON and wife, TONI EATON, husband and wife, hereinafter called the Grantees, their heirs, successors and assigns, a certain tract or parcel of land in Davidson County, Tennessee, described as follows:

BEING Lot No. 72 on the Plan of Haywood Acres, Section I, of record in Book 2900, page 17, Register's Office for said County.

SAID Lot fronts 95 feet on the south side of Dade Drive and runs back 206.9 feet on the west line and 219.2 feet on the east line, to a dead line on which it measures 95.6 feet.

Being the same property conveyed to Gerald M. Payne by Quitclaim

* Ms. Wilma Jean Payne is the sole heir and survivor of the estate of Gerald M. Payne who died on March 22, 2007. Ms. Wilma Jean Payne was married to Gerald M. Payne when he died and Mr. Payne died without any children and without a will.(SEE EXHIBIT A DEATH CERTIFICATE)

executed by Nola M. Cooley, f/k/a Nola M. Payne, dated 03/07/73 of record in Book 4688 page 72 Register's Office for Davidson County, Tennessee. The said Gerald M. Payne having since died. (EX. A)

Gerald M. Payne having died on March 22, 2007 with the sole surviving heir being Wilma Jean Payne who took the property by right of intestate succession in the state of Tennessee. (EXHIBIT A)

This conveyance is subject to all easements, restrictive covenants and conditions, and other matters of record, including all items set out on any applicable plat of record including, but not limited to, all of the following matters:

1) ***Any easements of record and unrecorded encumbrances, reservations, exceptions, and defects, including but not limited to (a) unrecorded mortgages, unrecorded deeds of trust, and vendors', mechanics', materialmen's and all other liens, including any provisions thereof for future advances which could take priority of said lien, (b) Federal, State, and local taxes, including county, school, improvement, water, drainage, sewer, inheritance, personal property, and income, (c) State and Federal bankruptcy, insolvency, receivership, and probate proceedings, (d) judgments and pending suits, in State and Federal Court, (e) covenants; conditions; restrictions; reservations; liens; encumbrances; easements; right-of-way; leases; mineral, oil , gas and geothermal rights.***

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, successors and assigns, forever;

AND I COVENANT with the said Grantees that I am lawfully seized and possessed of said land in fee simple and have a good right to convey it and the same is unencumbered, unless otherwise set out herein;

AND I FURTHER covenant and bind myself, my 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.

This property is improved property known as: 351 Dade Drive, Nashville, TN 37211.

WITNESS MY HAND(S) THIS 9th DAY OF Sept, 2008, IN Williamson COUNTY, TENNESSEE.

Wilma Jean Payne
WILMA JEAN PAYNE

STATE OF TENNESSEE)
COUNTY OF Williamson)

Before me, Nick Shelton, of the State and County aforesaid, personally appeared **WILMA JEAN PAYNE**, with whom I am personally acquainted (AND/OR proved to me on the basis of satisfactory evidence), and who, upon oath, acknowledged herself to be the within named bargainor, and that she as such SELLER/GRANTOR, executed the foregoing instrument for the purpose therein contained, by signing her name hereinabove.

WITNESS MY HAND(S) THIS 30th DAY OF Sept, 2008, in Williamson County, Tennessee.

Notary Public

My Commission Expires: 5/14/2011

STATE OF TENNESSEE)
COUNTY OF Williamson)

I hereby swear or affirm that to the best of affiant's knowledge, information and belief, the actual consideration for the transfer or the value of the property transferred, whichever is greater, is $75,000.00, which amount is equal to or greater than the amount which the property transferred would command at a fair and voluntary sale.

Wilma Jean Payne
Affiant/Grantee

Subscribed and sworn to before me this 30th day of Sept, 2008, in Williamson Co TN.

Notary Public

My Commission Expires: 5/14/2011

THE FRONT OF THIS DOCUMENT IS PINK - THE BACK OF THIS DOCUMENT IS BLUE AND HAS AN ARTIFICIAL WATERMARK - F

EXHIBIT
tabbies 4

ALABAMA
CERTIFICATE OF DEATH

TYPE IN PERMANENT BLACK INK. DO NOT USE GREEN, RED, OR BLUE INK.

County File Number —

State File Number 101

3. ____
6. ____
19. ____
20. ____
26. ____
27. ____
34. ____

SSN: 409-62-9972

Gerald M. Payne

NAME OF DECEASED

46. ____

49. ____
55. ____

DECEASED

1. DECEASED—NAME First	Middle	Last (Type last name all capitals)	2. DATE OF DEATH (Month, Day, Year)	3. COUNTY OF DEATH
Gerald	Marion	PAYNE	March 22, 2007	Jackson

4. CITY, TOWN, OR LOCATION OF DEATH AND ZIP CODE	5. INSIDE CITY LIMITS (Specify Yes or No)	6. PLACE OF DEATH—HOSPITAL OR OTHER INSTITUTION—(If not in either, give street and number)
Henagar 35978	No	4829 Co. Rd. 16

7. IF HOSPITAL (Specify Inpatient, ER or Outpatient, DOA)	8. HISPANIC ORIGIN (Specify Yes or No) If Yes, Specify Cuban, Mexican, Puerto Rican, etc.	9. RACE—(Specify American Indian, Black, White, etc.)	10. SEX
	No	White	Male

11. AGE	12. UNDER 1 YEAR MOS.	DAYS	UNDER 1 DAY HOURS	MINS.	13. DATE OF BIRTH (Month, Day, Year)	14. DECEASED'S SOCIAL SECURITY NUMBER
70 YRS.					February 10, 1937	409-62-9972

15. EDUCATION (Specify ONLY highest grade completed below) Elementary or High School (0-12)	College (1-4 or 5+)	16. MARITAL STATUS (Specify Married, Never Married, Widowed, Divorced)	17. SURVIVING SPOUSE (If wife, give maiden name)	18. Was Decedent ever in Armed Forces (Specify Yes or No)
11		Married	Wilma Jean Brown	Yes

19. STATE OF BIRTH (If not in USA, name country)	20. RESIDENCE—STATE	21. COUNTY	22. CITY, TOWN, OR LOCATION AND ZIP CODE
Tennessee	Alabama	Jackson	Henagar 35978

23. INSIDE CITY LIMITS (Specify Yes or No)	24. STREET AND NUMBER	25. INFORMANT—Name and Address
no	4829 Co. Rd. 16	Wilma Payne 4829 Co. Rd. 16 Henagar, Alabama 35978

26. USUAL OCCUPATION (Give kind of work done during most of working life even if retired)	27. KIND OF BUSINESS OR INDUSTRY
Heavy Equipment Operator	Self employed

28. FATHER—NAME First	Middle	Last	29. MAIDEN NAME OF MOTHER— First	Middle	Last
Horace		Payne	Hattie	Ruth	Luna

BURIAL

30. DISPOSITION OF BODY (Specify Burial, Cremation, Medical Donation, Hospital Disposal, Other)	31. DATE OF DISPOSITION (Month, Day, Year)	32. CEMETERY OR CREMATORY—Name	33. LOCATION—(City or Town—State)
Burial	Mar. 24, 2007	Green Haven Cemetery	Pisgah, Alabama

34. FUNERAL HOME—Name and Address	35. FUNERAL DIRECTOR—Signature	36. DATE SIGNED BY FUNERAL DIRECTOR
Kerby Funeral Home P.O. Box 207 Henagar, Alabama 35978	William F. Jeffrey	April 5,2007

CERTIFIER

37. **X Certifying Physician** (Physician certifying cause of death) "To the best of my knowledge death occurred at the time and date, and due to the cause(s) and manner stated."
__ Medical Examiner __ Coroner "On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, place, and due to the cause(s) and manner stated."
Signature: [signature]

38. DATE SIGNED (Month, Day, Year): 3/26/07

39. TIME AND DATE OF DEATH	40. DATE AND TIME PRONOUNCED DEAD (For Coroner/M.E. use only)	41. NAME AND TITLE OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 46)
4:55 AM 3/22/2007		Dr. A.E. Thomas, Jr., M.D.

42. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 46)	43. CERTIFIER LICENSE NUMBER
48 Medical Park Drive East Ste 457 Birmingham, AL 35235	15172

44. REGISTRAR— Signature	For State or County use only	45. DATE FILED (Month, Day, Year)
Tina Clayton		April 5, 2007

MEDICAL CERTIFICATION

CAUSE

46. 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. Pancreatic Cancer	
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. DUE TO (OR AS A CONSEQUENCE OF):	
c. DUE TO (OR AS A CONSEQUENCE OF):	
d.	
47. PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.	48. WAS THERE A PREGNANCY IN LAST 42 DAYS? (Specify Yes, No, or Unk.)

49. MANNER OF DEATH (Specify—Accident, Homicide, Suicide, Undetermined Circumstances, Pending Investigation, Natural Cause)	50. AUTOPSY (Specify Yes or No)	51. If yes, were findings considered in determining cause of death? (Specify Yes or No)
NATURAL	NO	

52. HOW INJURY OCCURRED (Enter nature of injury in Item 46, Part I or Item 47, Part II)	53. DATE OF INJURY (Month, Day, Year)	54. HOUR OF INJURY
		M.

55. INJURY AT WORK (Specify Yes or No)	56. PLACE OF INJURY—(Specify at home, farm, street, factory, office building, etc.)	57. LOCATION OF INJURY (Street or R.F.D. No., City or Town, State)

ADPH-HS 2/Rev 11-93

This is a legal record and must be filed within five (5) days after death.

This is a certified copy of a record that was tendered to the Jackson County Health Department on April 5, 2007

DEPT. OF PUBLIC HEALTH JACKSONBORO AL

Signed: Tina Clayton Date: APR 05 2007