****

ADDRESS NEW OWNER:	SEND TAX BILL TO:	MAP/PARCEL NO.
DEBBIE K. KILPATRICK	Same.	149 05 0A 227.00
227 Pepper Ridge Circle		
Antioch, Tennessee 37013		

****

This Instrument Prepared By:
PAULA OGLE BLAIR, ATTORNEY AT LAW
211 Donelson Pike, Suite 214, Nashville, Tennessee 37214
FROM INFORMATION BY OTHERS

BILL GARRETT, Davidson County
Trans:T20170001102 DEEDWARR
Recvd: 01/05/17 10:59 7 pgs
Fees:37.00 Taxes:0.00
20170105-0001255

WARRANTY DEED

For the purpose of a transfer of the real property of the Estate of Ilene D. Breece, who died on March 20, 2016 and pursuant to the Last Will and Testament of Ilene D. Breece, of record in Docket No. 16P-571 in the Probate Court Clerk's Office for Davidson County, Tennessee, Debbie Kaye Kilpatrick, Executrix, by these presents, the Estate of Ilene D. Breece devise and transfer and convey unto **Debbie Kaye Shaver Kilpatrick, also known as Debbie Kaye Kilpatrick**, her successors and assigns, all of her right, title and interest in and to the following described tract of land; to wit:

Land in Davidson County, Tennessee, being Unit No. 227, on the Plan of Phase Six, Pepper Ridge Condominiums, of record in Plat Book 8250, Page 239 and Annexation in Book 9155, Page 806, Register's Office for said County, to which plan reference is hereby made for a more complete description.

Being the same property conveyed to Ilene D. Breece, unmarried, on August 27, 2012, by Warranty Deed from Ann Carney, Successor Trustee of the Barney E and Dorothy J. Samples Trust in Instrument No. 20120827-0077139, Register's Office for Davidson County, Tennessee.

The Warranty Deed was corrected by Scrivener's Affidavit, Instrument No. 20120927-0087915, on September 27, 2012.

Said property is conveyed subject to such limitations, restrictions and encumbrances as may affect the premises.

This property is improved property known as 227 Pepper Ridge Circle, Antioch, Tennessee 37013.

A copy of the Death Certificate and a certified copy of the Last Will and Testament of Ilene D. Breece, are attached.

Witness my hand this 26th day of September, 2016

Debbie Kaye Kilpatrick
DEBBIE KAYE KILPATRICK, EXECUTRIX

****

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

The actual consideration is the Last Will and Testament of Ilene D. Breece.

Subscribed and sworn to me this 26th day of September, 2016

Debbie Kaye Kilpatrick
DEBBIE KAYE KILPATRICK

Clara Mundy Reynolds
NOTARY PUBLIC

My Commission Expires: 9-19-18

CLARA MUNDY STATE OF TENNESSEE NOTARY PUBLIC COUNTY OF DAVIDSON

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STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Personally appeared before me, Clara Mundy Reynolds, a Notary Public in and for said Country and State, the within named **DEBBIE KAYE KILPATRICK**, the bargainor, with whom I am personally acquainted, and who acknowledged that she executed the within instrument for the purposes therein contained.

Witness my hand and official seal at Nashville, TN, this 26th day of September 2016

Clara Mundy Reynolds
NOTARY PUBLIC

My Commission Expires: 9-19-18

CLARA MUNDY STATE OF TENNESSEE NOTARY PUBLIC COUNTY OF DAVIDSON

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER

DECEDENT

1. DECEDENT'S LEGAL NAME (First, Middle, Last, Suffix): Fannie Ilene Breece
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): March 20, 2016
4. TIME OF DEATH (Approx.): 8:24 pm
6a. AGE-Last Birthday (Years): 86
6b. UNDER 1 YEAR: Months / Days
6c. UNDER 1 DAY: Hours / Minutes
6. DATE OF BIRTH (Month, Day, Year): November 24, 1929
7. BIRTHPLACE (City and State or Foreign Country): Lawrence Co., TN

TYPE/PRINT IN PERMANENT BLACK INK

8a. PLACE OF DEATH (Check only one)
IF DEATH OCCURRED IN A HOSPITAL: ☐ Inpatient ☐ ER/Outpatient ☐ DOA
IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL: ☐ Hospice facility ☐ Nursing home/Long term care facility ☒ Decedent's home ☐ Other residence ☐ Other (Specify)

8b. FACILITY NAME (If not institution, give street and number): 227 Pepper Ridge Circle
8c. CITY OR TOWN: Antioch
8d. COUNTY OF DEATH: Davidson

9. MARITAL STATUS: ☐ Married ☐ Married, but separated ☒ Widowed ☐ Divorced ☐ Never married ☐ Unknown
10. SURVIVING SPOUSE (If wife, give name prior to first marriage)
11a. DECEDENT'S USUAL OCCUPATION: Bookkeeper
11b. KIND OF BUSINESS/INDUSTRY: Lumber Company

12. SOCIAL SECURITY NUMBER: [redacted]877
13a. RESIDENCE-STATE OR FOREIGN COUNTRY: Tennessee
13b. COUNTY: Davidson
13c. CITY OR TOWN: Antioch

13d. STREET AND NUMBER: 227 Pepper Ridge Circle
13e. INSIDE CITY LIMITS: ☒ Yes ☐ No
13f. ZIP CODE: 37013
14. WAS DECEDENT EVER IN US ARMED FORCES? ☐ Yes ☒ No

NAME OF DECEDENT (For use by Physician or Institution)

15. DECEDENT'S EDUCATION (Check the box that best describes the highest degree or level of school completed at the time of death)
☐ 8th grade or less
☐ 9th – 12th grade; no diploma
☒ High school graduate or GED completed
☐ Some college credit, but no degree
☐ Associate degree (e.g., AA, AS)
☐ Bachelor's degree (e.g., BA, AB, BS)
☐ Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA)
☐ Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LLB, JD)
☐ Unknown

16. DECEDENT OF HISPANIC ORIGIN? (Check the box that best describes whether the decedent is Spanish/Hispanic/Latino. Check the "No" box if decedent is not Spanish/Hispanic/Latino)
☒ No, not Spanish/Hispanic/Latino
☐ Yes, Mexican, Mexican American, Chicano
☐ Yes, Puerto Rican
☐ Yes, Cuban
☐ Yes, other Spanish/Hispanic/Latino (Specify)
☐ Unknown

17. DECEDENT'S RACE (Check one or more races to indicate what the decedent considered himself or herself to be)
☒ White
☐ Black or African American
☐ American Indian or Alaska Native (Name of the enrolled or principal tribe)
☐ Asian Indian
☐ Chinese
☐ Filipino
☐ Japanese
☐ Korean
☐ Vietnamese
☐ Other Asian (Specify)
☐ Native Hawaiian
☐ Guamanian or Chamorro
☐ Samoan
☐ Other Pacific Islander (Specify)
☐ Other (Specify)
☐ Unknown

PARENTS

18. FATHER'S NAME (First, Middle, Last): Albert Davis
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last): Pellie Turner

DISPOSITION

20a. INFORMANT'S NAME: Debbie Kilpatrick
20b. RELATIONSHIP TO DECEDENT: Daughter
20c. MAILING ADDRESS (Street and Number, City, State, Zip Code): 227 Pepper Ridge Circle, Antioch, TN 37013

21a. METHOD OF DISPOSITION: ☒ Burial ☐ Cremation ☐ Donation ☐ Entombment ☐ Removal from State ☐ Other (Specify)
21b. PLACE OF DISPOSITION (Name of cemetery, crematory, other place): Five Points Church of Christ Cemetery
21c. LOCATION - City or Town and State: Five Points, TN

22a. SIGNATURE OF FUNERAL DIRECTOR: ▶ William R. Appleton
22b. LICENSE NUMBER: 2700
22c. SIGNATURE OF EMBALMER: ▶ Richard Morrison
22d. LICENSE NUMBER: 3137

23a. NAME AND ADDRESS OF FUNERAL HOME: Woodbine Funeral Home, Hickory Chapel, 5852 Nolensville Road, Nashville, TN 37211
23b. LICENSE NUMBER OF FUNERAL HOME: 760

REGISTRAR

24. REGISTRAR'S SIGNATURE: ▶ Kristy Parrish DR
25. DATE FILED (Month, Day, Year): 3/30/16

CERTIFIER

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CAUSE OF DEATH MUST COMPLETE AND SIGN WITHIN 48 HOURS.

26. CERTIFIER (Check only one):
26a. ☒ PHYSICIAN - To the best of my knowledge, death occurred at the date and place, and due to the cause(s) and manner stated.
26b. ☐ 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 stated.

27a. SIGNATURE OF CERTIFIER: ▶
27b. LICENSE NUMBER: 2352
27c. DATE SIGNED (Month, Day, Year): 3/29/16
27d. NAME AND ADDRESS: John Williams, MD 300 20th Ave N, Nashville, TN 37203

MEDICAL CERTIFICATION

28. PART I. Enter the chain of events (diseases, injuries, or complications) that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. Enter only one cause on a line.

		Approximate Interval: Onset to death
IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. Brent Cancer	Due to (or as a consequence of)	
Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST — b.	Due to (or as a consequence of):	
c.	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.

29a. WAS AN AUTOPSY PERFORMED? ☐ Yes ☐ No
29b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? ☐ Yes ☐ No

30. MANNER OF DEATH: ☒ Natural ☐ Homicide ☐ Accident ☐ Pending Investigation ☐ Suicide ☐ Could not be determined
31. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☐ No ☐ Unknown
32. IF FEMALE: ☐ Not pregnant within past year ☐ Pregnant at time of death ☐ Not pregnant, but pregnant within 42 days of death ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Unknown if pregnant within the past year

33. IF TRANSPORTATION INJURY, SPECIFY: ☐ Driver/Operator ☐ Passenger ☐ Pedestrian ☐ Other (Specify)
34a. DATE OF INJURY (Month, Day, Year)
34b. TIME OF INJURY
34c. INJURY AT WORK? ☐ Yes ☐ No
34d. PLACE OF INJURY – at home, farm, street, factory, office, building, etc. (Specify)
34e. DESCRIBE HOW INJURY OCCURRED
34f. LOCATION OF INJURY (Street and Number, City or Town, State)

PH-1659 (Rev. 10/2011) RDA 1399

COPYRIGHT/CAUTION/ANTI-FRAUD PROTECTION

8422451

I hereby certify the above to be a true and correct representation of the record or document on file in this department. This certified copy is valid only when printed on security paper showing the red embossed seal of the Tennessee Department of Health. Alteration or erasure voids this certification. Reproduction of this document is prohibited.

MAR 30 2016

Tennessee Code Annotated 68-3-101 et seq., Vital Records Act of 1977

8422451

R. Benton McDonough, JD
STATE REGISTRAR

John J. Dreyzehner, MD, MPH, FACOEM
COMMISSIONER

Date Issued

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

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD

Copy

FILED

APR 14 2016

RICHARD R. ROOKER, Clerk
By _____ Deputy

16P571

LAST WILL AND TESTAMENT
OF
ILENE D. BREECE

I, Ilene D. Breece, a citizen and resident of, Antioch, Davidson County, Tennessee, being of sound mind and disposing memory, do hereby make, publish and declare this instrument as my Last Will and Testament revoking any and all wills and codicils by me at any time heretofore made.

One: I direct all my just debts, including my funeral expenses and the expenses of my last illness, be paid as soon as practical. I direct that all estate, inheritance, succession and other death taxes which may be payable by, or chargeable against my estate or the beneficiary or beneficiaries thereof, be paid out of my general estate as expenses of administration and not charged to any beneficiary or beneficiaries.

Two: I hereby devise the real estate that I now own, known as 227 Pepper Ridge Circle, Antioch, TN, to Debbie Kaye Shaver Kilpatrick in its entirety.

Three: The items of my estate listed below I give, devise and bequeath to the person named by each item listed:

Joel and Michele Shaver – Artist drawing of granddaughters, Mother's ring, Glass vinegar server, creamer and sugar bowl passed down from my mother and Cherry Bedroom Suit

Debbie Kaye Shaver Kilpatrick – Curio Cabinet and Contents, Picture created by my mother (Flowers and Vines) and my Diamond Earrings.

Gayle and Richard Breece - "Sound of Music" numbered plates (8)

Amy Ann Shaver Trail - Opal Ring, butterfly necklace and earrings

Aubry Lynn Shaver Bayless - Zicron necklace and earrings, chip diamond ring

Four: All of the rest and residue of my estate, I give, devise and bequeath 40% to my daughter, Debbie Kaye Shaver Kilpatrick and 40% to my son, Joel Edward Shaver and the remaining 20% to my step son, Richard Dean Breece.

Copy

Five: I hereby nominate, constitute and appoint Debbie Kaye Shaver Kilpatrick as Executrix of my estate to serve without bond.

In witness whereof, I set my hand and seal at Antioch, Tennessee, this 29th day of December, 2014

Ilene D. Breece

Signed, sealed, published and declared by the Textatrix, Ilene D. Breece, as and to her Last Will and Testament in the presence of all of us at one and the same time, and we, at her request and in her presence and in the presence of each other, have hereunto subscribed our names as witnesses and we do hereby attest to the sound and disposing mind of said Testatrix and to the performance of the aforesaid act of execution at the place and on the date herein above set out

residing at 608 Hogan Rd
Nashville TN 37220

residing at 5543 Edmondson Pike
Nashville TN 37211

Copy

AFFIDAVIT

Leslie Gose and Rehman Ansari after being duly sworn according to law, depose and say:

1. That they are adult citizens of Nashville, Davidson County, Tennessee.
2. That they witnessed the execution of the Last Will and Testament of Ilene D. Breece, dated 29th day of December 2014 to which this affidavit is attached, and that this affidavit is being made at the request of the Testatrix and in accordance with T.C.532-211.
3. That their signatures are affixed to said Last Will and Testament, that they signed or affixed the same at the instance and at the request of the Testatrix and in her presence and in the presence of each other, at the place and on the date recited in said Last Will and Testament.
4. That the Testatrix signed said paper writing as and for her Last Will and Testament in their sight and presence.
5. That at the time they witnessed said will, the Testatrix was, in their opinion of sound mind.

Leslie Gose

Rehman Ansari

State of Tennessee, County of Davidson

Subscribed and sworn before me this 29 day of Dec, 2014

John M Boyd
Notary Public

My commission expires 05/08/18

DHARAM PAL GOYAL
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY
MY COMMISSION EXPIRES 5-8-2018

STATE OF TENNESSEE

I, RICHARD R. ROOKER, Clerk of the Circuit Court for Davidson County, in the State aforesaid, do hereby certify that the foregoing is a true and correct copy of the LAST WILL AND TESTAMENT heretofore filed in the SEVENTH Circuit Court for Davidson County, Tennessee, on the 14 day of APRIL, 2016, in Docket Number 16P571, IN RE: BREECE, ILENE D, as same remains of record in the Minutes of said Court.

IN TESTIMONY WHEREOF, I hereunto subscribe my name and affix the seal of said Court, at office, in Nashville, the 05 day of JANUARY in the year 2017 and in the 240 year of American Independence.

RICHARD R. ROOKER, Clerk,

By: _____

Deputy Clerk

[SEAL]

