This instrument was prepared by:
Howard M. Skipworth #012469
Attorney at Law
6408 Clarksville Pike
P.O. Box 489
Joelton, Tennessee 37080-0489
Telephone: (615) 876-2594
Fax: (615) 876-4292
Email: hmskiplaw@comcast.net
From paperwork provided by clients –
No Title examination requested.

Karen Johnson Davidson County
Batch# 230189 AFFIDAVITH
05/15/2019 12:49:28 PM 25 pgs
Fees: $127.00 Taxes: $0.00
20190515-0045817

New Owners:

Sandra Hamlett Webb
7530 Whites Creek Pike
Joelton, TN 37080

Timothy Ronald Webb
899 Robertson Academy Road
Nashville, TN 37220

Amy Lynne Webb Bull
111 Marty Lane
White Bluff, TN 37187

Susan Denise Webb Burch
1397 Judge Tyler Drive
Clarksville, TN 37043

Send tax notice to:

Timothy Ronald Webb
899 Robertson Academy Road
Nashville, TN 37220

Map No.: 15
Parcel: 17
14D-15300

AFFIDAVIT OF INHERITANCE

STATE OF TENNESSEE

COUNTY OF DAVIDSON

Come the Affiants, Sandra Webb, being first duly sworn according to law, and being of lawful age and residing for the past 40 or more years in Davidson County, Tennessee, and

Timothy Ronald Webb, being first duly sworn according to law, and being of lawful age and residing for the past 30 or more years in Davidson County, Tennessee, and Amy Lynne Webb Bull, being first duly sworn according to law, and being of lawful age and residing for the past 10 or more years in Dickson County, Tennessee; and Susan Denise Webb Burch, being first duly sworn according to law, and being of lawful age and residing for the past 10 or more years in and around Montgomery County, Tennessee, pursuant to Section 30-2-712 of the Tennessee Code Annotated hereby swear to the following of their own free will and based upon their personal knowledge and familiarity:

1. As evidenced by a Certificate of Death attached hereto as Exhibit "A", Paul Ronald Webb died testate on June 8, 2016.

2. The decedent died leaving a surviving spouse, Sandra Hamlett Webb. The decedent was married twice during his lifetime. He first married Evelyn M. Webb (A/K/A Evelyn Joyce Webb), who died October 21, 1992, as evidenced by Certificate of Death attached hereto as Exhibit "B". The decedent and first spouse were blessed with three biological children during this union: Timothy Ronald Webb, Amy Lynne Webb Bull and Susan Denise Webb Burch. The decedent and his surviving spouse never gave birth or adopted any children.

3. At the time of his death, the decedent held a fee simple interest in the following described real property:

SEE EXHIBIT "C"
ATTACHED HERETO
FOR DESCRIPTION

Being the property conveyed to Paul Ronald Webb and wife, Evelyn M. Webb, by deed from John D. Bartee and wife, Lois E. Bartee, of record in Deed Book 4687, page 506, Register's Office for Davidson County, Tennessee. Evelyn M. Webb having since died on October 21, 1992.

SUBJECT TO Governmental zoning and subdivision ordinances or regulations in effect thereon.

REFERENCE is made to prior title recorded in Book 4687, page 506 in the Register's Office of Davidson County, Tennessee.

5. The undersigned received a determinative interest in the real estate described above by virtue of being the recipients of the real estate under the provisions of the decedent's Will, probated in the Seventh Circuit Court (Probate Division) of Davidson County, State of Tennessee, Probate No. 19P60. See Certified Order admitting Will to probate attached as Exhibit D, and photographic copy of Will attached as Exhibit E.

6. The decedent nor his wife received any long term aid from the Bureau of Tenncare, as evidenced by release attached hereto as Exhibit F.

7. At the time of his death, the decedent owed no debt. The decedent owed no inheritance tax.

8. This Affidavit will confirm the vesting of title to certain real property described herein and located in Joelton, Davidson County, Tennessee, after the death of Paul Ronald Webb in Sandra Hamlett Webb, Life tenant, subject to enumerated obligations and, subject to her right to sell and to receive the value of her life estate at the time of sale. In the event Sandra Hamlett Webb remains on the property until her death, pursuant to Will provisions, the property is to be sold and the net proceeds divided equally among the children of Paul Ronald Webb, deceased, subject to trust provisions in Will. If the house does not sell for seven (7) years after the death of Paul Ronald Webb, deceased, the trust provisions in Will do not apply.

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

10. 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 to evidence transfer of title to the property to the beneficiaries.

Sandra Hamlett Webb

SANDRA HAMLETT WEBB, LIFE TENANT

Subscribed and sworn to before me this 12th day of April, 2019.

Howard M. Sherrod

Notary Public

My commission expires:

HOWARD M. SHERROD NORTH
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY
MY COMMISSION EXPIRES 11-5-2019

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared **SANDRA HAMLETT WEBB**, the within named Life tenant, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the persons described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that they executed the foregoing instrument for the purposes therein contained as their 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 12th day of April, 2019.

NOTARY PUBLIC

My Commission expires:

HOWARD M. SKIPWORTH STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON COUNTY MY COMMISSION EXPIRES 11-5-2019

TIMOTHY RONALD WEBB, REMAINDERPERSON

Subscribed and sworn to before me this 9th day of April, 2019.

Notary Public

My commission expires:

HOWARD M. SKIPWORTH STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON COUNTY MY COMMISSION EXPIRES 11-5-2019

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared **TIMOTHY RONALD WEBB**, the within named remainderperson, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the persons described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that they executed the foregoing instrument for the purposes therein contained as their 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 9th day of April, 2019.

NOTARY PUBLIC

My Commission expires:

HOWARD M. SKIPWORTH STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON COUNTY MY COMMISSION EXPIRES 11-5-2019

SUSAN DENISE WEBB BURCH,
REMAINDERPERSON

Subscribed and sworn to before me this 15th day of April, 2019.

Notary Public
My commission expires:_____

HOWARD M. SKIPWORTH
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
MY COMMISSION EXPIRES 11-5-2019

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared **SUSAN DENISE WEBB BURCH**, the within named remainderperson, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the persons described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that they executed the foregoing instrument for the purposes therein contained as their 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 15th day of April, 2019.

NOTARY PUBLIC

My Commission expires:_____

HOWARD M. SKIPWORTH
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
MY COMMISSION EXPIRES 11-5-2019

AMY LYNNE WEBB BULL,
REMAINDERPERSON

Subscribed and sworn to before me this 1st day of May, 2019.

Notary Public
My commission expires: 9/6/22

JILL DUKESHIER
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared **AMY LYNNE WEBB BULL**, the within named remainderperson, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the persons described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that they executed the foregoing instrument for the purposes therein contained as their 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 1st day of May, 2019.

NOTARY PUBLIC

My Commission expires: 9/6/22

JILL DUKESHIER
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY

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): Paul Ronald Webb
2. SEX: Male
3. DATE OF DEATH (Month, Day, Year): June 8, 2016
4. TIME OF DEATH (Approx.): 12:12 A.M.
5a. AGE-Last Birthday (Years): 77
5b. UNDER 1 YEAR: Months / Days
5c. UNDER 1 DAY: Hours / Minutes
6. DATE OF BIRTH (Month, Day, Year): September 20, 1938
7. BIRTHPLACE (City and State or Foreign Country): Davidson County, TN

TYPE/PRINT IN PERMANENT BLACK INK

6a. 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): Alive Hospice - Skyline Madison Campus
8c. CITY OR TOWN: Madison
8d. COUNTY OF DEATH: Davidson

NAME OF DECEDENT (For use by Physician or Institution)

9. MARITAL STATUS: ☒ Married ☐ Married, but separated ☐ Widowed ☐ Divorced ☐ Never married ☐ Unknown
10. SURVIVING SPOUSE (If wife, give name prior to first marriage): Sandra Hamlett
11a. DECEDENT'S USUAL OCCUPATION: Pastor
11b. KIND OF BUSINESS/INDUSTRY: Church/Clergy
12. SOCIAL SECURITY NUMBER: -6406
13a. RESIDENCE-STATE OR FOREIGN COUNTRY: Tennessee
13b. COUNTY: Davidson
13c. CITY OR TOWN: Joelton
13d. STREET AND NUMBER: 7530 Whites Creek Pike
13e. INSIDE CITY LIMITS: ☒ Yes ☐ No
13f. ZIP CODE: 37080
14. WAS DECEDENT EVER IN US ARMED FORCES? ☐ Yes ☒ No

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): Milton Paul Webb
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last): Gladys Elizabeth Bates

DISPOSITION

20a. INFORMANT'S NAME: Sandra Webb
20b. RELATIONSHIP TO DECEDENT: wife
20c. MAILING ADDRESS (Street and Number, City, State, Zip Code): 7530 Whites Creek Pike Joelton, TN 37080
21a. METHOD OF DISPOSITION: ☒ Burial ☐ Cremation ☐ Donation ☐ Entombment ☐ Removal from State ☐ Other (Specify) _____
21b. PLACE OF DISPOSITION (Name of cemetery, crematory, other place): Woodlawn Memorial Park
21c. LOCATION - City or Town and State: Nashville, TN
22a. SIGNATURE OF FUNERAL DIRECTOR: ▶ Bobby Wayne Cook
22b. LICENSE NUMBER: 6870
22c. SIGNATURE OF EMBALMER: ▶ Jim Brewer
22d. LICENSE NUMBER: 2969
23a. NAME AND ADDRESS OF FUNERAL HOME: Anderson & Garrett Funeral Home 3501 Old Clarksville Pike Joelton, TN 37080
23b. LICENSE NUMBER OF FUNERAL HOME: 193

6

REGISTRAR

24. REGISTRAR'S SIGNATURE: ▶ DR
25. DATE FILED (Month, Day, Year): 6/14/16

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: 52952
27c. DATE SIGNED (Month, Day, Year): 06/13/2016
27d. NAME AND ADDRESS: Sasha Smith, M.D. 1718 Patterson Street, 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.	METASTATIC COLON CANCER	
Due to (or as a consequence of): b.		
Due to (or as a consequence of): c.		
Due to (or as a consequence of): d.		

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

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

8511780

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.

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

JUN 14 2016

8511780

R. Benton McDonough, JD
STATE REGISTRAR

John J. Dreyzehner, MD, MPH, FACOEM
COMMISSIONER

Date [redacted]

CERTIFICATION OF VITAL RECORD

COPYSAFE CAPTURE® ANTI-FRAUD PROTECTION

Metropolitan Government of Nashville and Davidson County

Philip Bredesen, Mayor

METROPOLITAN HEALTH DEPARTMENT
311 23rd AVENUE, NORTH
NASHVILLE, TENNESSEE 37203
(615) 327-9313

This is to certify that this is a true and correct copy of the record filed with the Tennessee Department of Public Health, Vital Records, by the Metropolitan Health Department of Nashville and Davidson County.

This is valid only when the seal of the Metropolitan Health Department of Nashville and Davidson County is affixed.

NOV 2 1992

Julia J. Wadley, M.D.

N

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

9205141

TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT

CERTIFICATE OF DEATH

STATE FILE NUMBER

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last): Evelyn Joyce Webb
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): October 21, 1992
4. SOCIAL SECURITY NUMBER: -6609
5a. AGE – LAST BIRTHDAY (Years): 51
5b. UNDER 1 YEAR: MOS. / DAYS
5c. UNDER 1 DAY: HOURS / MINS.
6. DATE OF BIRTH (Month, Day, Year): Sept. 12, 1941
7. BIRTHPLACE (City and State or Foreign Country): Nashville, Tennessee
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 ☐ Yes 2 ☒ No
9a. PLACE OF DEATH (Check only one): HOSPITAL: 1 ☐ Inpatient 2 ☐ ER/Outpatient 3 ☐ DOA; OTHER: 4 ☐ Nursing Home 5 ☒ Residence 6 ☐ Other (Specify)
9b. FACILITY NAME (If not institution, give street and number): 7530 Whites Creek Pike
9c. CITY, TOWN, OR LOCATION OF DEATH: Joelton
9d. COUNTY OF DEATH: Davidson
10. MARITAL STATUS – Married, Never Married, Widowed, Divorced (Specify): Married
11. SURVIVING SPOUSE (If wife, give maiden name): Paul Ronald Webb
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.): Housewife
12b. KIND OF BUSINESS/INDUSTRY: Own Home
13a. RESIDENCE – STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Joelton
13d. STREET AND NUMBER OR RURAL LOCATION: 7530 Whites Creek Pike
CENSUS TRACT
13e. INSIDE CITY LIMITS? 1 ☒ Yes 2 ☐ No
13f. ZIP CODE: 37080
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No – Yes, specify Cuban, Mexican, Puerto Rican, etc.) ☐ Yes 0 ☒ No
Specify, if yes:
15. RACE – American Indian, Black, White, etc. (Specify): White
16. DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (0-12); College (1-4 or 5+)

NAME OF DECEDENT: For use by physician or institution

PARENTS

17. FATHER'S NAME (First, Middle, Last): Herman Clayton McCool
18. MOTHER'S NAME (First, Middle, Maiden Surname): Eula Phearson Vaughn

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Paul Ronald Webb
19b. RELATIONSHIP TO DECEASED: Husband
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 7530 Whites Creek Pike, Joelton, Tn. 37080

DISPOSITION

20a. METHOD OF DISPOSITION: 1 ☒ Burial 2 ☐ Cremation 3 ☐ Removal from State 4 ☐ Donation 5 ☐ Other (Specify)
20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): Woodlawn Cemetery
20c. LOCATION – City or Town, State: Nashville, Tennessee
21a. SIGNATURE OF FUNERAL DIRECTOR: ▶ Robert Anderson
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 492
21c. SIGNATURE OF EMBALMER: ▶ Robert Anderson
21d. LICENSE NUMBER OF EMBALMER: 1954
22a. NAME AND ADDRESS OF FUNERAL HOME: Anderson & Garrett P.O. Box 68 Joelton, Tn., 37080
22b. LICENSE NUMBER OF FUNERAL HOME: 193

REGISTRAR

23. REGISTRAR'S SIGNATURE: ▶ Mary C. Pentecost
24. DATE FILED (Month, Day, Year): December 2, 1992

CERTIFIER

25a. PHYSICIAN – To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner as stated.
1 ☒ SIGNATURE AND TITLE OF PHYSICIAN ▶
25b. LICENSE NUMBER
25c. DATE SIGNED (Month, Day, Year): 10/26/92
26a. MEDICAL EXAMINER – On the basis of examination and/or investigation, in my opinion, death occurred at the time, 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 WITHIN 48 HOURS.

27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print)

CAUSE OF DEATH

28. 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.

IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. Colon 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.

Approximate Interval Between Onset and Death

SEE INSTRUCTIONS ON OTHER SIDE

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.

29a. WAS AN AUTOPSY PERFORMED? 1 ☐ Yes 2 ☐ No
29b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? 1 ☐ Yes 2 ☐ No

30. MANNER OF DEATH: 1 ☐ Natural 2 ☐ Accident 3 ☐ Suicide 4 ☐ Homicide 5 ☐ Pending Investigation 6 ☐ Could not be Determined
31a. DATE OF INJURY (Month, Day, Year)
31b. TIME OF INJURY: M
31c. INJURY AT WORK? 1 ☐ Yes 2 ☐ No
31d. DESCRIBE HOW INJURY OCCURRED
31e. PLACE OF INJURY – At home, farm, street, factory, office building, etc. (Specify)
31f. LOCATION (Street and Number or Rural Route Number, City

[redacted]

BIRTH NO.

PH-1859
REV 1/89

EXHIBIT "C"

LAND in Davidson County, Tennessee, situated in the 14th Civil District described according to an unrecorded survey made by G & G Engineering Company, on November 2, 1968 as follows:

BEGINNING at a point, this point being an iron pin, 30 feet East of the center line of the Springfield Highway, approximately 811 feet northwest along the easterly ROW line of the Springfield Highway from the center line of Morgan Road; thence northwesterly 150.0 feet along the easterly ROW line of the Springfield Highway to an iron pin; thence N 79 deg. 16′ E, 1337.0 feet to an iron pin; thence S 02 deg. 30′ E 143.8 feet along a fence bounded by the J. T. Reeves property to an iron pin; thence S 79 deg. 16′ W, 1312.0 feet to an iron pin; this being the point of beginning, containing 4.7 acres, more or less.

IN THE **SEVENTH** CIRCUIT COURT (**PROBATE DIVISION**), FOR DAVIDSON COUNTY, **TWENTIETH** JUDICIAL DISTRICT, STATE OF TENNESSEE

In Re: ESTATE OF
PAUL RONALD WEBB,
Deceased.

TIMOTHY RONALD WEBB,
PETITIONER.

FILED
JAN 17 2019
RICHARD R. ROOKER, Clerk
By D.C.

Case No. 19760

ORDER ADMITTING WILL TO PROBATE WITHOUT FORMAL ADMINISTRATION

Based on an examination of the Petition, the decedent's last will and first codicil, the affidavit of the subscribing witnesses; the sworn oath of Petitioner and all beneficiaries, on the 17 day of January, 2019, the Special Master finds the following:

A. Decedent was a resident of Davidson County, Tennessee;

B. Decedent died on June 8, 2016 at the age of seventy-seven (77) years;

C. Decedent left a paper writing bearing date of July 6, 2005, which was properly signed and witnessed (the "will"). The will consist of seven (7) typewritten pages. Decedent left a paper writing bearing date of May 8, 2012, which was properly signed and witnessed (the "first codicil"). The first codicil consist of two (2) typewritten pages.

D. The decedent's personal property subject to a court-supervised administration was properly distributed according to the decedent's will; and

Based on these findings, the Court orders the following.

[redacted]

1. Decedent's will dated July 6, 2005 and first codicil dated May 8, 2012 be admitted to probate for muniment of title only.

2. No letters testamentary need be issued to Timothy Ronald Webb; and

3. No court-supervised administration of the decedent's estate is required.

ENTERED, this the 17 day of January, 2019.

PROBATE JUDGE

Approved for entry:
HOWARD M. SKIPWORTH & ASSOCIATES

HOWARD M. SKIPWORTH #012469
Attorney for Petitioner
6408 Clarksville Highway
Post Office Box 489
Joelton, Tennessee 37080-0489
Telephone: 615/876-2550
E-mail: hmskiplaw@comcast.net

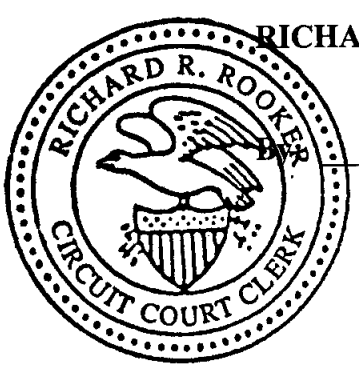
STATE OF TENNESSEE

I, RICHARD R. ROOKER, Clerk of the Circuit Court for Davidson County, do hereby certify that the foregoing is a true and complete copy of the **ORDER FOR MUNIMENT OF TITLE** heretofore assigned to Seventh Circuit Court (Probate Division) for Davidson County, Tennessee, Case No. **19P60**.

ESTATE OF PAUL RONALD WEBB

IN TESTIMONY WHEREOF, I hereunto subscribe my name and affix the seal of said Court, at office, in Nashville, the 17th day of January in the year Two Thousand and Nineteen.

RICHARD R. ROOKER, Clerk



D.C.

Deputy Clerk

19PL0
FILED
JAN 17 2019

Last Will and Testament

OF

PAUL RONALD WEBB

I, Paul Ronald Webb, being a resident of Joelton, Davidson County, Tennessee, being of sound mind and disposing memory and not under constraint, do hereby make, publish and declare this as my Last Will and Testament, and, at the same time, revoke any and all wills and codicils which have been heretofore made by me.

ARTICLE I.

I desire that any costs of administration of my estate, any taxes assessed or subject at that time to assessment against my estate, any just indebtedness, and/or any funeral expenses, be paid first from the proceeds to any life insurance which is payable to my estate, second from any cash that I may have, including funds in any checking or savings accounts, and third from any other funds available from my personal assets, should the life insurance proceeds, cash, or bank accounts be insufficient.

ARTICLE II.

I give, devise and bequeath all proceeds from my American General Life Insurance Policy, policy number 6770902 as follows:

1. Twenty Percent (20.000%) in trust for the benefit of Susan Denise Daniels, Timothy Ronald Webb, Trustee, to be managed, controlled and distributed by said trustee pursuant to the terms and conditions set forth in Article V of this, my Last Will and Testament.

2. Twenty Eight Percent (28.000%) to Timothy Ronald Webb;

3. Twenty Seven Percent (27.000%) to Amy Lynne Reeves; and

4. Twenty Five Percent (25.000%) to Sandra Hamlett Webb.

ARTICLE III.

I hereby devise to my Wife, Sandra Hamlett Webb, the parcel of real property now occupied by me as my residence with all appurtenances and improvements used in connection therewith, located in the City of Joelton, County of Davidson, and State of Tennessee, during the term of her life. I direct that my said Wife shall pay all charges incident to maintaining said property including, without limitation, all assessments, insurance premiums, taxes and ordinary repairs. If my said Wife shall fail to pay any such charges, then any one or more of my issue may pay the same; and in such event, such person or persons so paying shall have a lien against said property in the amount so expended with interest thereon until paid.

I hereby authorize my Wife in her absolute discretion to sell said property for cash at such time and for such price as she deems advisable. In the event that my said Wife shall sell said property her Deed alone shall be sufficient to convey the complete title without any obligation on the part of the purchaser to look to the application of the proceeds of the sale; provided, however, that there shall be paid to my said Wife from the proceeds of sale an amount representing the then current value of her life interest therein, and the balance of the net proceeds shall be distributed equally, share and share alike, to my children Timothy Ronald Webb, Amy Lynne Reeves, and Timothy Ronald Webb as trustee for Susan Denise Daniels, and I further direct that portion of said proceeds which I have bequeathed to Timothy Ronald Webb as trustee for Susan Denise Daniels shall be managed, controlled and distributed by said trustee pursuant to the terms and conditions set forth in Article V of this, my Last Will and Testament.

If said property remains unsold, upon the death of my said Wife, I direct that it be sold and the proceeds thereof be divided equally, share and share alike, among my three children, Timothy Ronald Webb, Amy Lynne Reeves, and Timothy Ronald Webb as trustee for Susan Denise Daniels, and I further direct that portion of the proceeds which I have bequeathed to Timothy Ronald Webb as trustee for Susan Denise Daniels shall be managed, controlled and distributed by said trustee pursuant to the terms and conditions set forth in Article V of this, my Last Will and Testament.

ARTICLE IV.

All of the rest, residue and remainder of my estate, including any property, real, personal and mixed, tangible and intangible, not otherwise disposed of in this my will, including all property which I may acquire or become entitled to after the execution of this my will, I bequeath and devise in fee simple absolute to my wife, Sandra Hamlett Webb.

In the event my said Wife and shall predecease me or shall fail to survive me by more than one hundred and twenty (120) hours or in the event my said Wife and I die simultaneously or in a common disaster, then all of the rest, residue and remainder of my estate, including any property, real, personal and mixed, tangible and intangible, not otherwise disposed of in this my will, including all property which I may acquire or become entitled to after the execution of this my will, I bequeath and devise in fee simple absolute and in equal portions, share and share alike to my children Timothy Ronald Webb, Amy Lynne Reeves and Timothy Ronald Webb as trustee for Susan Denise Daniels, and to Jeffrey Dean Nichols who is the son of my wife, Sandra Hamlett Webb, it being my intent that the said Timothy Ronald Webb, Amy Lynne Reeves, Timothy Ronald Webb as trustee for Susan Denise Daniels and Jeffrey Dean Nichols each receive one-fourth (1/4) of my residuary estate; and I further direct that portion of the proceeds of my residuary estate which I have bequeathed to Timothy Ronald Webb as trustee for Susan Denise Daniels shall be managed, controlled and distributed by said trustee pursuant to the terms and conditions set forth in Article V of this, my Last Will and Testament.

ARTICLE V.

Any and all property, real estate, including any property, real, personal and mixed, tangible and intangible, including all property which I may acquire or become entitled to after the execution of this my will, which I have bequeathed to Timothy Ronald Webb as trustee for Susan Denise Daniels (herein referred to as the "Trust Estate") is to be held, managed, controlled, invested, reinvested and distributed by said Timothy Ronald Webb as trustee for the benefit of Susan Denise Daniels upon the following terms and conditions.

1. Any and all property which I have bequeathed to said Timothy Ronald Webb as trustee for Susan Denise Daniels, real, personal and mixed, tangible and intangible, including all property which I may acquire or become entitled to after the of this my will, including any

property of my estate which is not sold or otherwise converted to cash under the terms of this my Last Will and Testament, but not including any cash assets, proceeds from the sale of any property and all other liquid assets, shall be collected and maintained by Timothy Ronald Webb as trustee for Susan Denise Daniels and, the trustee, in his absolute discretion and when the trustee shall be of the opinion that it is necessary or desirable, may turn over to Susan Denise Daniels any or all parts of said property in no fewer than semi-annual installments, and, in any event, the trustee shall turn over to Susan Denise Daniels all such property within seven (7) years from the date of my death. The trustee shall turn over to Susan Denise Daniels all parts of such property remaining in the custody and control of the trustee upon the date which is seven (7) years from the date of my death. Except as where otherwise specifically permitted or directed in this my Last Will and Testament, the trustee shall not sell or otherwise dispose of any part or portion of said property, except that the trustee may consent to the sale or conveyance of any interest in any real property which constitutes any part of the Trust Estate when the trustee, in his discretion, and when he deems it necessary or advisable to sell or convey any such interest, and upon the sale or conveyance of any such interest in real property, the trustee shall collect, deposit and maintain all proceeds from the sale or conveyance of such interest in real property as cash assets of the Trust Estate which shall be deposited and maintained in the Trust Account as set forth in the Article V, Paragraphs 2 *et seq.* of this my Last Will and Testament. The trustee may deduct and pay from the gross proceeds of any sale or conveyance of any interest in real property which forms a part of the Trust Estate any and all costs and expenses necessary for the sale and conveyance of said interest(s) including, without limitation, all real estate sales commissions.

2. Any and all cash assets, proceeds from the sale of any property of my estate which is sold or otherwise converted to cash under the terms of this my Last Will and Testament, and all other liquid assets which I have bequeathed to said Timothy Ronald Webb as trustee for Susan Denise Daniels shall be collected, deposited and maintained by Timothy Ronald Webb as trustee for Susan Denise Daniels in a single interest bearing account with a federally insured baking institution for the use and benefit of Susan Denise Daniels, which account shall hereinafter be referred to as the "Trust Account".

3. The trustee shall pay from the Trust Account, in monthly installments, the sum of Five Hundred and No/100 Dollars ($500.00) to or for the benefit of Susan Denise Daniels and the trustee may pay said monthly installment from the entire net income and/or principal of the Trust Account so much thereof as the trustee may, in his absolute discretion, deem necessary to pay the said monthly installment. The trustee shall pay said monthly installment from the Trust Account until all of the principal of the Trust Account and any interest earned thereon is exhausted. At any time the amount of principal and interest earned thereon remaining in the Trust Account shall fall below the sum of Five Hundred and No/100 Dollars, then the trustee shall pay to or for the benefit of Susan Denise Daniels all amounts of principal and interest thereupon remaining in the Trust Account.

4. The trustee is expressly authorized, in his unlimited discretion, to encroach upon the principal of the Trust Account herein created for the purpose of paying to or for Susan Denise Daniels said monthly installment of Five Hundred and No/100 Dollars ($500.00). The trustee is directed to exercise this right of encroachment when and only when it his opinion it is necessary to do so in order to pay said monthly installment to or for Susan Denise Daniels.

5. Neither the principal nor income of the Trust Estate or Trust Account shall be pledged, assigned, transferred, sold or in any other manner whatsoever be accelerated, anticipated, or encumbered by any beneficiary, nor shall any income or principal of the Trust Estate or Trust Account be in any manner subject or liable in the hands of the trustee for the debts, contracts, or engagements, of any beneficiary, or be subject to any assignment, or any other voluntary or involuntary alienation or disposition whatever. But all distribution of income or principal the same shall be paid only to the beneficiary entitled, if living.

6. Except as otherwise permitted in this my Last Will and Testament, the trustee shall not be entitled to any compensation for his services in the collection, managing, handling, investment or distribution of the any part of the Trust Estate.

7. In the event the said Timothy Ronald Webb shall be unwilling or unable to serve as trustee of the Trust Estate for Susan Denise Daniels, then I hereby nominate and appoint my brother, Robert M. Webb, as trustee of the Trust Estate for Susan Denise Daniels.

ARTICLE VI.

In the event Susan Denise Daniels shall predecease me, shall fail to survive me by more than one hundred and twenty (120) hours or shall die simultaneously with me or in a common disaster with me, then all parts and portions of my estate which would have passed to Susan Denise Daniels had she survived me I bequeath to Larry Bryan Daniels, III in fee simple absolute. In the event that said Larry Bryan Daniels, III is a minor at the time of my death and my aforesaid Wife and Susan Denise Daniels have predeceased me, then I hereby nominate and appoint Timothy Ronald Webb trustee for the minor Larry Bryan Daniels, III to hold those parts and portions of my estate which pass to Larry Bryan Daniels, III in trust for the benefit of Larry Bryan Daniels, III until the said Larry Bryan Daniels, III shall turn eighteen (18) years of age at which time said trustee shall distribute all parts and portions of said trust estate directly to Larry Bryan Daniels, III.

ARTICLE VII.

I hereby appoint my son Timothy Ronald Webb as Executor of this my Last Will and Testament and direct that no bond be required of my said Executor for the faithful performance of his duties, and that he not be required to make or file any inventories or accountings for my estate. I hereby grant to my said Executor the continuing, absolute, discretionary power to deal with all property, real and personal, at any time forming part of my estate, and to exercise any and all powers set forth in T.C.A. 35-50-110 to the extent applicable, all of which provisions and powers are incorporated herein by reference as fully as if copied herein verbatim. These powers as set out in said statute on the date of the execution of this will are granted, notwithstanding that said statute may be amended hereafter or repealed at the time of my death.

In the event my son Timothy Ronald Webb is unwilling or unable to serve as Executor of this my Last Will and Testament, then I hereby appoint my brother, Robert M. Webb, my first alternate Executor and direct that no bond be required of my said Executor for the faithful performance of his duties and that he not be required to file any inventories or accountings for my estate. I hereby grant to my said Executor the continuing, absolute, discretionary power to deal with all property, real and personal, at any time forming a part of my estate, and to exercise

any and all powers set forth in Tenn. Code Ann. Sec. 35-50-110 to the extent applicable, all of which provisions and powers are incorporated herein by reference as if copied herein verbatim. These powers as set out in said statute on the date of the execution of this will are granted, notwithstanding that said statute may be amended hereafter or repealed at the time of my death.

IN WITNESS WHEREOF, I have hereunto subscribed my name to this my Last Will and Testament, consisting of this and six (6) preceding typewritten page, and for the purpose of identification I have initialed each such page, all in the presence of the persons witnessing it at my request on this the 6th day of July, 2005, at Goodlettsville, Tennessee.

Paul R. Webb

PAUL RONALD WEBB

Page 7 of 7 of the Last Will and Testament of Paul Ronald Webb

The foregoing instrument, consisting of this and six (6) preceding typewritten pages, was signed, sealed, published and declared by Paul Ronald Webb, the Testator, to be his Last Will and Testament, in our presence, and we at his request and in his presence and in the presence of each other, have hereunto subscribed our names as witnesses, this 6 day of July, 2005, at Goodlettsville, Tennessee.

NAME: Ross Baxter Residing at: 391 N. Birchwood Dr., Hendersonville, TN 37075

NAME: Tina Terrell Residing at: 137 Southern Trace Hendersonville TN 37075

RE: THE LAST WILL AND TESTAMENT OF

PAUL RONALD WEBB

AFFIDAVIT

STATE OF TENNESSEE)

COUNTY OF DAVIDSON)

Ross Barton and Dan Terrell, being first duly sworn do jointly and severally make oath to the following:

That the foregoing was signed, published, and declared by the above named Testator as and for his Last Will and Testament in our sight and presence who signified to us, the attesting witnesses, that the foregoing instrument is his Last Will and Testament and we have hereunto fixed our signatures as attesting witnesses at his request, in his sight and presence, and in the sight and presence of each other, and we further depose that at the said place and time the Testator was of sound mind and disposing memory, and signed this Last Will and Testament as his free and voluntary act.

NAME: Ross Barton

ADDRESS: 391 N. Birchwood Dr.
Hendersonville, TN 37075

NAME: Dan Terrell

ADDRESS: 137 Southern Trace
Hendersonville TN 37075

Sworn to and subscribed before me this 6th day of July, 2005.

Brandi Smith
NOTARY PUBLIC

BRANDI SMITH NOTARY PUBLIC AT LARGE SUMNER COUNTY, TENN.

My Commission Expires:
11-29-07

19PL0 FILED
JAN 17 2019
By D. Hamilton Clerk Deputy

First Codicil
to the
LAST WILL AND TESTAMENT
of
PAUL RONALD WEBB

I, **PAUL RONALD WEBB**, of Joelton, Davidson County, Tennessee, hereby make, publish and declare this to be the First Codicil to the Last Will and Testament executed by me on the 6th day of July, 2005.

FIRST. Wheresoever the name Amy Lynne Reeves appears in the text of my Will, I delete and replace it with Amy Lynne Bull.

SECOND. Wheresoever the sum of Five Hundred and 00/100 ($500.00) Dollars appears in Article V of my Will, I delete and replace with the sum of One Thousand and 00/100 ($1,000.00) Dollars.

IN WITNESS WHEREOF, I have hereunto set my hand to this Codicil No. One (1) to my Last Will and Testament at Joelton, Tennessee, on this the 8th day of May, 2012.

Paul Ronald Webb

PAUL RONALD WEBB

This is page one of my First Codicil.

SIGNED, DECLARED and **PUBLISHED** by the said **PAUL RONALD WEBB**, as and for his last Will, in the presence of us, the undersigned, who, at his request and in his sight and presence, and in the sight and presence of each other, have subscribed our names hereto as attesting witnesses the day and date written.

NAME **ADDRESS**

Howard M. Skipworth — Signature
P.O. Box 489 — Street Address
HOWARD M. SKIPWORTH — (Print Name)
Jackson, Tn 38302 — City/State/Zip

Phyllis E. Young — Signature
5105 Summit Dr. — Street Address
Phyllis E. Young — (Print Name)
Jackson Tn. 38305 — City/State/Zip

AFFIDAVIT PROVING WILL

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

Before me, the undersigned Notary Public, personally appeared the undersigned affiants, whose names are subscribed to the instrument to which this Affidavit is attached and, after being duly sworn, declared to me that, in their sight and presence **PAUL RONALD WEBB**, signed, declared and published the instrument to which this Affidavit is affixed or annexed as the testator's will; and requested them to act as witnesses to its execution and to execute this Affidavit; that in the testator's sight and presence and in the sight and presence of each other, each affiant signed the instrument as witness; and that the testator was at that time 18 years of age or over, was of sound mind and disposing memory, was fully capable of making a will and was under no duress, compulsion or constraint.

Howard M. Skipworth
Signature

P. O. Box 489
Street Address

HOWARD M. SKIPWORTH
(Print Name)

Joelton, Tn 37080
City/State/Zip

Phyllis E. Young
Signature

5105 Summit Dr.
Street Address

Phyllis E. Young
(Print Name)

Joelton Tn. 37073
City/State/Zip

Subscribed and sworn to before me
this 8th day of May 2012

Bonni K. Skipworth
NOTARY PUBLIC

My Commission Expires: _____

BONNI K. SKIPWORTH
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY

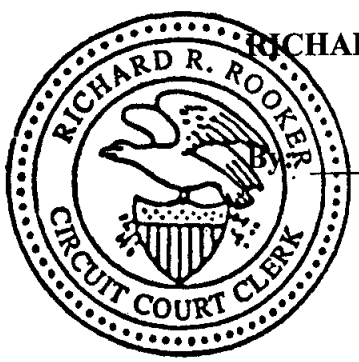
MY COMMISSION EXPIRES:
November 3, 2015

STATE OF TENNESSEE

I, RICHARD R. ROOKER, Clerk of the Circuit Court for Davidson County, do hereby certify that the foregoing is a true and complete copy of the **LAST WILL AND TESTAMENT** heretofore assigned to Seventh Circuit Court (Probate Division) for Davidson County, Tennessee, Case No. **19P60.**

ESTATE OF PAUL RONALD WEBB

IN TESTIMONY WHEREOF, I hereunto subscribe my name and affix the seal of said Court, at office, in Nashville, the 17th day of January in the year Two Thousand and Nineteen.



RICHARD R. ROOKER, Clerk

By: _____
Deputy Clerk

State of Tennessee
Department of Finance and Administration
Bureau of TennCare
Third Party Liability Division
310 Great Circle Road, 4th Floor
Nashville, Tennessee 37243
Toll Free: 866-389-8444 • FAX: 615-413-1941

Bill Haslam
Governor

Larry B. Martin
Commissioner

1/14/2019

HOWARD SKIPWORTH
LEGAL COUNSEL
PO BOX 489
JOELTON, TN 37080

RE: PAUL WEBB
Last Four Of SSN 6406

Dear HOWARD SKIPWORTH:

The Division of TennCare releases its claim against the probate estate of the above decedent for the marked reason:

X T.C.A. §71-5-116(c) (2) - Based upon a review of the information you provided, we do not find long-term TennCare benefits paid by the State of Tennessee on behalf of the decedent

____ T.C.A. §71-5-116(c) - The decedent is survived by a spouse; therefore, the claim is deferred. TennCare reserves the right to assert a claim upon the death of the surviving spouse.

_____ T.C.A. §71-5-116(c) - The decedent was under the age of fifty-five at the time of death; therefore, the estate recovery claim is waived.

If there are questions, you may contact the Estate Recovery Unit at (866) 389-8444.

Note this release only applies to decedent's probate estate and does not apply to trusts or any assets held in trust. For trust inquires, please contact us by phone for referral to TennCare's Office of the General Counsel.

Sincerely,

Jangela J. Howard

