

THIS INSTRUMENT WAS PREPARED BY
PHILANDER L. BUTLER
ATTORNEY AT LAW
GASTON BUILDING
1827 - 5th AVE. NO., BIRMINGHAM, ALA.

2112

AFFIDAVIT

STATE OF ALABAMA)
JEFFERSON COUNTY)



19760203000006660 1/4 \$.00
Shelby Cnty Judge of Probate, AL
02/03/1976 12:00:00 AM FILED/CERT

My name is T. J. Gardner. I am Vice President of Smith & Gaston Funeral Directors, Inc., 1500 - 4th Avenue, North, Birmingham, Alabama. I was the administrator of the Estate of Anita S. McIntosh, deceased. She died in Birmingham, Alabama on July 8, 1973. Her death certificate is attached. Anita S. McIntosh was the widow of Will C. McIntosh, deceased, who died in Birmingham, Alabama on August 3, 1973. His death certificate is attached. The Estate of Anita S. McIntosh was administered in Jefferson County, Alabama under Case #78703 and letters were issued to me as administrator on August 15, 1973. The final hearing on my administration was held in Probate Court on January 21, 1976, in which I was discharged as administrator. There were several claims filed against the Estate of Anita S. McIntosh and all were paid except the claim of Burgess Nursing Home in the amount of \$696.50. This claim was given to me by Mr. Burgess in September, 1975 and was beyond the statutory time to file a claim against the Estate of Anita S. McIntosh. All other claims in the Estate of Anita S. McIntosh were paid. I have known Mrs. McIntosh and her husband for more than 30 years and I was almost like a son to her. My wife, Mrs. Edna Gardner and my sister, Mrs. A. G. Gaston, were two of the closest friends Mrs. McIntosh had in Birmingham. From my own personal knowledge, I know that Mrs. Anita S. McIntosh was the daughter of a Methodist Bishop and she had no children. She had one sister who lived in Arkansas by the name of Mabel Saunders and Mrs. Saunders now lives in Nassau Bahamas. Mrs. Saunders had a daughter and, of course, this was Mrs. McIntosh's niece. Mrs. McIntosh had another niece and she was named after Mrs. McIntosh and her name was Anita Scott Holloway. Her father was a dentist in Ohio, somewhere, and Mrs. Holloway

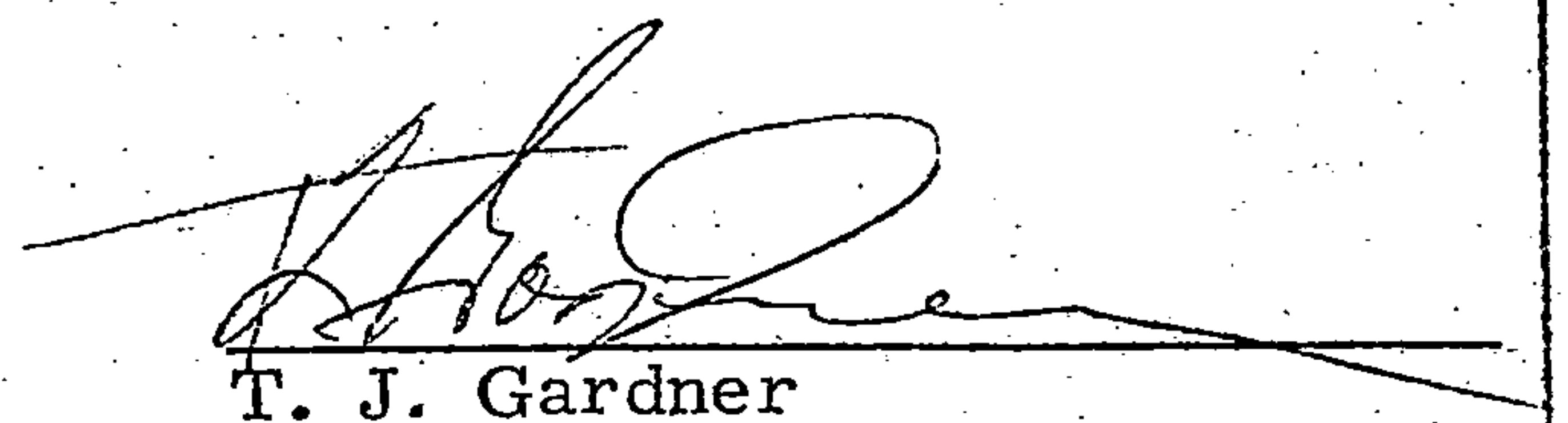


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was the only child, as far as I know. Also, Mrs. McIntosh always said she had two nieces and one sister; however, as I said, one of the nieces is Mrs. Saunders' daughter and the other niece, Anita Scott Holloway, is the daughter of a dead brother of Mrs. McIntosh. I can't recall the name of the dentist now but he was a Dr. Scott. Mrs. McIntosh came out of Nashville, Tennessee where her father and mother were very prominent people. Bishop Scott was a very prominent person in the Methodist Church and they are well known people in Nashville and she was well known in Birmingham. Her husband, Will C. McIntosh, was maintenance supervisor of some housing projects for several years in Birmingham, and I knew he and his wife very well and I know of no ^{other} relatives that Mrs. Anita S. McIntosh had. I also am aware of the fact that Will C. and Anita S. McIntosh were the owners of eight acres of land in Shelby County, Alabama and I now understand from Attorney Philander L. Butler of Birmingham that this deed was a joint survivorship deed and the legal papers that I have in my file with the Shelby County property on it reads as follows:

Eight acres of land in the SE corner of the SW $\frac{1}{4}$ of the NE $\frac{1}{4}$ of Section 23, Township 22, Range 3 West, Shelby County, Alabama. Said property being 420 feet North and South and 840 feet East and West. Situated in Shelby County, Alabama.

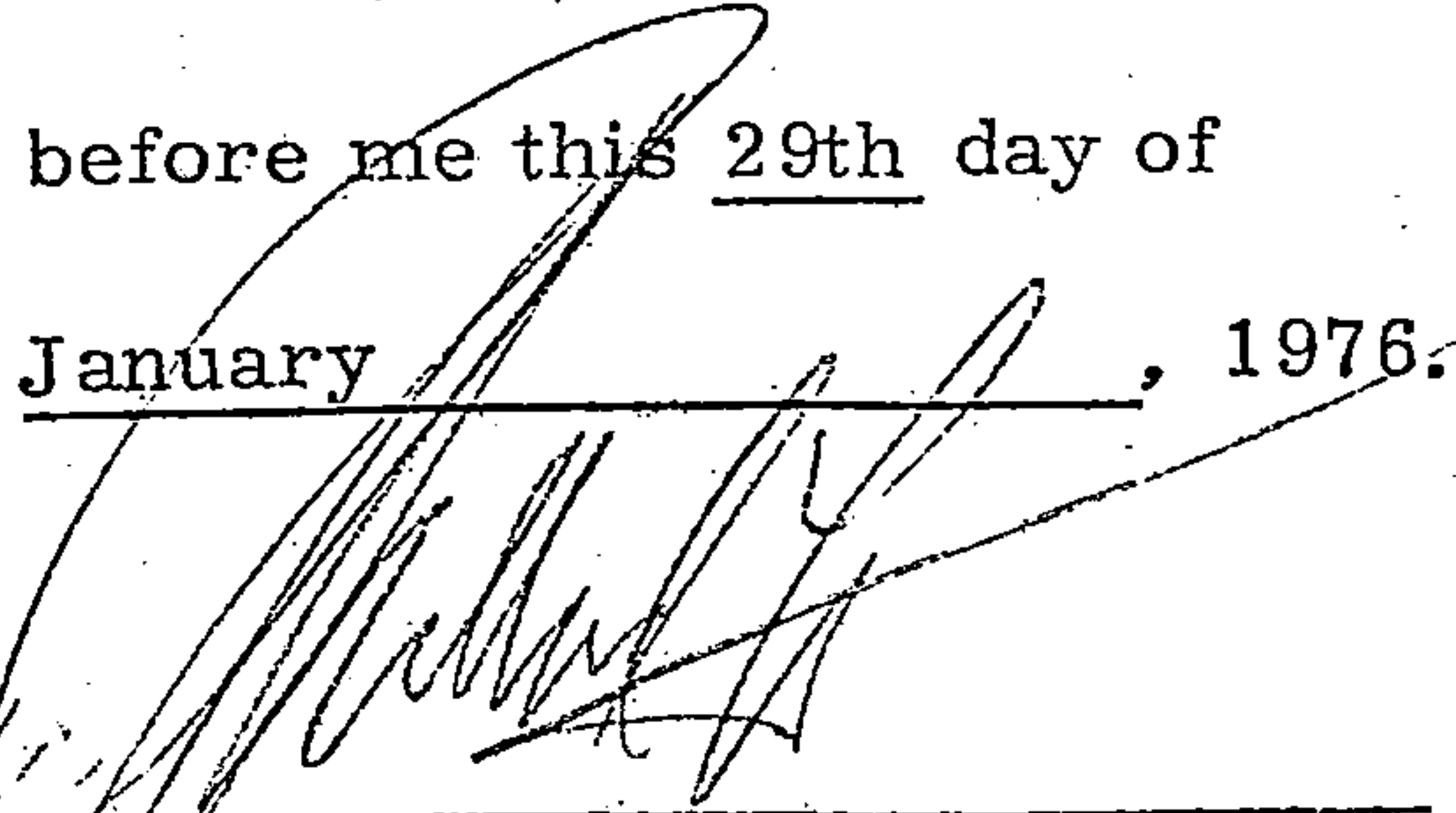
Given under my hand and seal this 29th day of January, 1976.


T. J. Gardner

SWORN TO AND SUBSCRIBED

before me this 29th day of

January, 1976.


Notary Public

b. CITY, TOWN, OR LOCATION Birmingham		c. IS PLACE OF DEATH INSIDE CITY LIMITS? YES ☐ NO ☐		c. CITY, TOWN, OR LOCATION Birmingham		37020		e. IS RESIDENCE INSIDE CITY LIMITS? YES ☐ NO ☐	
d. NAME OF HOSPITAL OR INSTITUTION Burgess Nursing Home		e. LENGTH OF STAY IN 1b		d. STREET ADDRESS 21-10th St. West				ON A FARM? YES ☐ NO ☐	
3. NAME OF DECEASED (Type or print) Anita		First Middle Last S. McIntosh		4. DATE OF DEATH July 8, 1973					
5. SEX Female	6. COLOR OR RACE Negro	7. MARRIED ☐ NEVER MARRIED ☐ WIDOWED ☒ DIVORCED ☐		8. DATE OF BIRTH 7-8-1893		9. AGE (In years last birthday) 80		IF UNDER 1 YEAR IF UNDER 24 HRS. Months Days Hours Min.	
10a. USUAL OCCUPATION (Give kind of work done during most of working life) Housewife		10b. KIND OF BUSINESS OR INDUSTRY		11. BIRTHPLACE (State or foreign country) Tennessee		12. CITIZEN OF WHAT COUNTRY? USA			
13. FATHER'S NAME S. Scott		14. MOTHER'S MAIDEN NAME Unknown		14a. NAME OF SURVIVING SPOUSE					
15. WAS DECEASED EVER IN U. S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service)		16. SOCIAL SECURITY NO.		17. INFORMANT'S NAME Minnie Gaston		Address P.O. Box 2621			
18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).) PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (a) Dr. Robert McIntosh								INTERVAL BETWEEN ONSET AND DEATH 1 day	
Conditions, if any, which gave rise to above cause (a), stating the underlying cause last. DUE TO (b) DUE TO (c)									
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE CONDITION GIVEN IN PART I(a)								19. WAS AUTOPSY PERFORMED? YES ☐ NO ☐	
20a. (Probably) ACCIDENT SUICIDE - HOMICIDE ☐ ☐ ☐		20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in Part I or Part II of item 18.)							
20c. TIME OF INJURY Hour Month, Day, Year a. m. p. m.									
20d. INJURY OCCURRED WHILE AT : NOT WHILE WORK ☐ AT WORK ☐		20e. PLACE OF INJURY (e. g., in or about home, farm, factory, street, office)		20f. CITY, TOWN, OR LOCATION		COUNTY		STATE	
21. I attended the deceased from 6/15/73 to 8/1/73 and last saw her alive on 7/1/73 Death occurred at 12:00 A m on the date stated above; and to the best of my knowledge, from the causes stated.									
22a. SIGNATURE <i>[Signature]</i>		(Degree or title)		22b. ADDRESS 506 First St. N.		22c. DATE SIGNED 16/8/73			
23a. BURIAL, CREMATION, REMOVAL (Specify) Burial		23b. DATE 7-11-73		23c. NAME OF CEMETERY OR CREMATORY Elmwood Cemetery		23d. LOCATION (City, town, or county) Birmingham, Alabama		(State)	
24. FUNERAL DIRECTOR Smith & Gaston, Birmingham, Alabama		ADDRESS		25. DATE RECD. BY LOCAL REG. JUL 18 1973		26. REGISTRAR'S SIGNATURE <i>[Signature]</i>			

STATE OF ALABAMA
COUNTY OF JEFFERSON

19760203000006660 3/4 \$.00
Shelby Cnty Judge of Probate, AL
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This is to certify that the above is a copy of a certificate as filed in the Bureau of Statistics and Vital Records, Jefferson County Health Department, Birmingham, Alabama.

14 PAGE
161
[Signature] M.D.
Health Officer
December 19, 1975
Date of Issue

[Signature]
Registrar of Vital Statistics
[Signature]
Authorized Bureau Clerk

Not Valid Without Embossed Seal of the Health Officer of Jefferson County, Alabama.

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JEFFERSON		b. CITY, TOWN, OR LOCATION Birmingham		c. IS PLACE OF DEATH INSIDE CITY LIMITS? YES ☐ NO ☐	c. CITY, TOWN, OR LOCATION Birmingham	37020	e. IS RESIDENCE INSIDE CITY LIMITS? YES ☐ NO ☐
d. NAME OF HOSPITAL OR INSTITUTION Burgess Nursing Home		f. LENGTH OF STAY IN 1b		d. STREET ADDRESS 21-10th Ct. West		ON A FARM? YES ☐ NO ☐	
3. NAME OF DECEASED (Type or print) Will C. McIntosh		4. DATE OF DEATH April 3, 1973					
5. SEX Male	6. COLOR OR RACE Negro	7. MARRIED ☒ NEVER MARRIED ☐ WIDOWED ☐ DIVORCED ☐	8. DATE OF BIRTH 10-10-1896	9. AGE (In years last birthday) 76	IF UNDER 1 YEAR Months Days Hours Min.		
10a. USUAL OCC. ATION (Give kind of work done during most of working life) Engineer		10b. KIND OF BUSINESS OR INDUSTRY		11. BIRTHPLACE (State or foreign country) Faunsdale, Alabama		12. CITIZEN OF WHAT COUNTRY? USA	
13. FATHER'S NAME John McIntosh		14. MOTHER'S MAIDEN NAME Hattie L. Prince		14a. NAME OF SURVIVING SPOUSE Anita McIntosh			
15. WAS DECEASED EVER IN U. S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service)		16. SOCIAL SECURITY NO. 418-09-5134		17. INFORMANT'S NAME Ethel Cook Address 21-10th Court West			
18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).) PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (a) <u>Ca of the Colon</u> Conditions if any, which gave rise to above cause (a), stating the underlying cause last. DUE TO (b) DUE TO (c) PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE CONDITION GIVEN IN PART II(a)						INTERVAL BETWEEN ONSET AND DEATH 1 yr	
20a. (Probably) ACCIDENT SUICIDE HOMICIDE ☐ ☐ ☐		20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in Part I or Part II of item 18.)					
20c. TIME OF INJURY Hour Month, Day, Year a. m. p. m.							
20d. INJURY OCCURRED WHILE AT NOT WHILE WORK ☐ AT WORK ☐		20e. PLACE OF INJURY (e. g., in or about home, farm, factory, street, office)		20f. CITY, TOWN, OR LOCATION COUNTY STATE			
21. I attended the deceased from Death occurred at 2 Jan 73 3 Apr 73 6:35 A m on the date stated above; and to the best of my knowledge, from the causes stated.		22a. SIGNATURE (Degrees or title) <u>[Signature]</u> M.D. 22b. ADDRESS 506 1st St N 22c. DATE SIGNED 7 May 73					
23a. BURIAL, CREMATION, REMOVAL (Specify) Burial		23b. DATE 4-6-73		23c. NAME OF CEMETERY OR CREMATORY Elmwood Cemetery		23d. LOCATION (City, town, or county) (State) Birmingham, Alabama	
24. FUNERAL DIRECTOR Smith/Gaston, Birmingham, Alabama		25. DATE RECD. BY LOCAL REG. MAY - 8 1973		26. REGISTRAR'S SIGNATURE <u>[Signature]</u>			

STATE OF ALABAMA
COUNTY OF JEFFERSON

This is to certify that the above is a copy of a certificate as filed in the Bureau of Statistics and Vital Records, Jefferson County Health Department, Birmingham, Alabama.

Health Officer

December 19, 1975

Date of Issue

Registrar of Vital Statistics

Authorized Bureau Clerk

Not Valid Without Embossed Seal of the Health Officer of Jefferson County, Alabama.