

STATE OF ALABAMA)
COUNTY OF SHELBY)

906

HEIRSHIP AFFIDAVIT

Come now Florence Elsie Harris and Mavis Jo Belcher, the Affiants herein, and after first having been duly sworn, said Affiants depose and say as follows:

1. That said Affiants have personal knowledge of the facts stated herein.

2. James Andrew Fitts, Sr. and Thelma Fitts were married to each other in Shelby County, Alabama, on or about the 21st day of December, 1915, and there were two natural children born to the said James Andrew Fitts, Sr. and Thelma Fitts, to-wit: Florence Elsie Harris and Mavis Jo Belcher. Furthermore, the aforementioned natural children are the only issue ever born to the said James Andrew Fitts, Sr. and Thelma Fitts, or either of them.

3. James Andrew Fitts, Sr. died intestate, in Shelby County, Alabama, on or about the 12 day of November, 1964, being survived only by his wife, Thelma Fitts, and his natural children, Florence Elsie Harris and Mavis Jo Belcher. Said Decedent's estate was never probated in any Court of competent jurisdiction, and no Probate proceedings are anticipated in regard to same.

4. At the time of the death of James Andrew Fitts, Sr., he and his aforementioned wife were vested with all right, title and interest in certain real estate located in Shelby County, Alabama, as tenants in common. The Warranty Deed reflecting such ownership being recorded at Book 148, Page 500 in the office of the Probate Judge, Shelby County, Alabama.

5. Thelma Fitts died testate in Shelby County, Alabama, on or about the 9th day of November, 1987, and her Will, which she executed on or about November 10, 1982, did bequeath and devise all real, personal and mixed property to her two children, Florence Elsie Harris and Mavis Jo Belcher. (The Death Certificate and Will of Thelma Fitts are attached hereto as Exhibits A & B respectively). Said decedent's Will was not submitted for Probate by any Court of competent jurisdiction, and no such Probate proceedings are anticipated by the said Decedent's heirs at law.

6. All of the lawful issue of James Andrew Fitts, Sr. and Thelma Fitts are over the age of 21 years and of sound mind; their names, addresses and relationships to the above designated Decedents being designated as follows:

Florence Elsie Harris
Surviving Daughter
Route 6 Box 120
Montevallo AL 35115

Mavis Jo Belcher
Surviving Daughter
Route 5 Box 311
Montevallo AL 35115

7. The Affiants herein are not aware of any other lawful issue of James Andrew Fitts, Sr. and Thelma Fitts, or either of them, or any other persons or entities who have lawful claims to any right, title or interest in or to any real estate, title to which was or is vested in the said James Andrew Fitts, Sr. and/or Thelma Fitts, and that both of said heirs at law have joined in the

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M. A. Spears

conveyance of certain real estate maintained within the estates of the
aforementioned Decedents.

8. There are no outstanding debts or claims against the estates of the
above designated Decedents.

FURTHERMORE, the Affiants saith naught.

Florence Elsie Harris
Florence Elsie Harris

Mavis Jo Belcher
Mavis Jo Belcher

STATE OF ALABAMA)
COUNTY OF SHELBY)

ACKNOWLEDGMENT

I, the undersigned authority, a Notary Public in and for said County, in
said State, hereby certify that Florence Elsie Harris and Mavis Jo Belcher
whose names are signed to the foregoing Heirship Affidavit, and who are known
to me, acknowledged before me on this day, that , being informed of the
contents of the Heirship Affidavit they executed the same voluntarily on the
day the same bears date.

Given under my hand and official seal this 14 day of Nov., 1988.

[Signature]
Notary Public

My Commission Expires: 9/89

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STATE OF ALABAMA
CERTIFICATE OF DEATH

FORM No. 101

TYPE OR PRINT IN PERMANENT INK

DECEASED

USUAL RESIDENCE WHERE DECEASED LIVED, IF DEATH OCCURRED IN INSTITUTION, GIVE RESIDENCE BEFORE ADMISSION.

PARENTS

CAUSE

IF NO PHYSICIAN WAS IN ATTENDANCE MEDICAL CERTIFICATION SHOULD BE COMPLETED BY THE LOCAL HEALTH OFFICER, OR CORONER

CERTIFIER

BURIAL

1. DECEASED—NAME FIRST: Thelma MIDDLE: Fitts LAST: Fitts			DATE OF DEATH (MONTH, DAY, YEAR) November 9, 1987		
2. RACE OR COLOR White	3. SEX F	4. AGE—LAST BIRTHDAY (YEARS, MO., DAYS) 88	5. UNDER 1 YEAR MO. DAYS HOURS MIN.	6. UNDER 1 DAY HOURS MIN.	7. DATE OF BIRTH (MONTH, DAY, YEAR) Sept. 20, 1899
8. CITY, TOWN, OR LOCATION OF DEATH Alabaster			9. HOSPITAL OR OTHER INSTITUTION—NAME OF NOT IN EITHER, GIVE STREET AND NUMBER Shelby Medical Center		
10. STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY) Alabama		11. CITIZEN OF WHAT COUNTRY USA		12. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) Widowed	
13. SOCIAL SECURITY NUMBER		14. USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED) Homemaker		15. KIND OF BUSINESS OR INDUSTRY Domestic-Own Home	
16. RESIDENCE—STATE Alabama		17. COUNTY Shelby		18. CITY, TOWN, OR LOCATION Montevallo	
19. FATHER—NAME FIRST MIDDLE LAST James Pickett		20. MOTHER—MAIDEN NAME FIRST MIDDLE LAST Hattie Sue Harris			
21. PHYSICIAN'S NAME (IF ANY) Dr. Sam Das			22. INFORMANT—NAME Florence E. Harris		
23. ADDRESS Alabaster, Al.			24. ADDRESS Rt. 6 Box 120 Montevallo, Al. 35115		
25. PART I. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR 25a, 25b, AND 25c)					26. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
25a. IMMEDIATE CAUSE MULTI SYSTEM ORGAN FAILURE					14 days
25b. CONDITIONAL, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (ALSO STATE THE UNDERLYING CAUSE LAST) SEPSIS					
25c. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (e.g., R.I. HEMORRHAGE)					
27. ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY)		28. DATE OF INJURY (MONTH, DAY, YEAR)		29. HOUR	
30. INJURY AT WORK (SPECIFY YES OR NO)		31. PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY)		32. LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, STATE)	
33. CERTIFICATION—PROVIDER ATTENDED THE DECEASED FROM		34. MONTH DAY YEAR 10/26/87		35. AND LAST SAW ALIVE ON MONTH DAY YEAR 11 9 87	
36. CERTIFICATION—CORONER OR HEALTH OFFICER: On the basis of the examination of the body and/or the investigation, is my relation correct as shown on the date and hour in the certificate stated.		37. HOUR OF DEATH		38. DID THE DECEASED NOT VENTURE THE DEATH OCCURRED AT THE PLACE, ON THE DATE, AND AT THE HOUR OF DEATH? NO	
39. SIGNATURE Sam Das, M.D.		40. SIGNATURE S. Das		41. DEGREE OR TITLE MD	
42. MAKING ADDRESS—CERTIFIER P.O. Box 544		43. R.F.D. NO.		44. CITY OR TOWN Alabaster, Alabama	
45. STATE Alabama		46. ZIP CODE 35007			
47. BURIAL, CREMATION, REMOVAL (SPECIFY) Burial		48. CEMETERY OR CREMATORY—NAME Macedonia Cemetery		49. LOCATION Rural Montevallo, Al.	
50. DATE (MONTH, DAY, YEAR) November 11, 1987		51. FUNERAL HOME—NAME AND ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP) Rockco's F.H. P.O. Box 44 Montevallo, Al. 35115			
52. FUNERAL DIRECTOR—SIGNATURE Elizabeth Rockco		53. REGISTRY SIGNATURE Samuel A. Brown		54. DATE RECEIVED BY LOCAL DEPARTMENT Nov 20, 1987	

ADPH 4-75-2/Rev. 5-84

STATE OF ALABAMA

COUNTY OF SHELBY

Dec 18 19 87

THIS IS AN OFFICIAL COPY OF THE RECORD THAT WAS TENDERED TO THE SHELBY COUNTY HEALTH DEPARTMENT ON November 20 19 87

(not valid without seal)

Carlyle C. Hedaway
SHELBY COUNTY REGISTRAR

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M. A. Spears

Last Will and Testament

OF
THELMA FITTS

STATE OF ALABAMA
JEFFERSON COUNTY

KNOW ALL MEN BY THESE PRESENTS, That I, THELMA FITTS, a resident citizen of Montevallo, Shelby County, Alabama, and a widow, being of sound mind and disposing memory, do make, publish and declare this instrument as and for my Last Will and Testament, and I hereby revoke any and all other wills and any codicils thereto made heretofore by me.

ITEM ONE: It is my will that all of my debts, including the expenses of my last illness and of my burial, shall be paid by my personal representative hereinafter named, as soon after my decease as practicable.

ITEM TWO: After the payment of my aforesaid debts and expenses, all of the rest, residue and remainder of the property, real, personal and mixed, of whatever nature and wherever situated, including any insurance policy or claim related thereto, which I may own at the time of my death or to which my estate may become entitled at or after my death, I give, bequeath and devise, in fee and per stirpes, unto my two children who are living at the time of the making of this will, namely: FLORENCE ELSIE HARRIS of Bessemer, Alabama, and MAVIS JO BELCHER of Montevallo, Alabama, in equal shares, share and share alike.

ITEM THREE: I hereby nominate, constitute and appoint my daughter, FLORENCE ELSIE HARRIS, as Executrix of this my Last Will and Testament. If my said daughter shall not survive me or if she shall fail to qualify or cease to act, then and in any such event, I nominate, constitute and appoint my daughter, MAVIS JO BELCHER, as Successor Executrix hereunder. I direct that my said Executrix and/or Successor Executrix, as the case may be, shall each be exempt from giving any bond, from filing any inventory of the property of my

Thelma Fitts

THELMA FITTS

M. A. Sears
[REDACTED]

[REDACTED]

[REDACTED]

estate and from filing any report of her transactions and proceedings in any Court, in said capacity hereunder. I do authorize and empower my said Executrix and/or my said Successor Executrix, whichever shall serve, to sell, transfer and convey any or all of the property, real, personal and mixed, belonging to my estate, at public or private sale and to execute and deliver the proper legal instrument(s) conveying title to the same to the purchaser(s) thereof, all without the prior order or subsequent approval of any Court.

IN WITNESS WHEREOF, I, THELMA FITTS, have set my hand to this my Last Will and Testament, at Bessemer, Alabama, on this the 15th day of November, 1982.

Thelma Fitts
THELMA FITTS

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The foregoing Will, consisting of this Page Two and one (1) preceding typewritten page, was signed and declared to be her Last Will and Testament by THELMA FITTS in our presence, and we, in her presence and in the presence of each other and at her request, have hereunto subscribed our names as witnesses to her signature to each page of this Will on the day the same bears date.

Wanda G. Hunter
Witness

314 No 18th St Bessemer, AL
Address

Henri L. Ross
Witness

1818 Exeter Avenue, Bessemer, AL 35020
Address

STATE OF ALA. SHELBY
I CERTIFY THIS
INSTRUMENT WAS FILED
88 NOV 15 AM 11:31

Thomas A. Scarborough, Jr.
JUDGE OF PROBATE

1. Dead Tax	\$	<u> </u>
2. Mtg. Tax		<u> </u>
3. Recording Fee		<u>12.50</u>
4. Indexing Fee		<u>1.00</u>
TOTAL		<u>13.50</u>