

AFFIDAVIT

STATE OF ALABAMA)
)
 SHELBY COUNTY)

not # 2000-02500

01/24/2000-02500,
 03:08 PM CERTIFIED
 SHELBY COUNTY JUDGE OF PROBATE
 005 MS 26.30

We, being all of the surviving heirs of MARY A. MOBLEY WEST, a deceased person, having died 09 AUG 68, do hereby state and swear under oath that no estate was ever probated for said deceased person, and that, as the heirs of her, are the only persons that have any claim, legal or equitable, to the said property described in a Warranty Deed recorded simultaneously herewith.

Mildred W. Houlditch
 MILDRED W. HOULDITCH
 SELLER

Elizabeth W. Britt
 ELIZABETH W. BRITT
 SELLER

Charles K. West
 CHARLES K. WEST
 SELLER

Joe W. West, Jr.
 JOE W. WEST, JR.
 SELLER

M. Ann W. Lee
 M. ANN W. LEE
 SELLER

James Elbert West
 JAMES ELBERT WEST
 SELLER

Evelyn W. Wyatt
 EVELYN W. WYATT
 SELLER

Janice C. Stone
 JANICE C. STONE
 SELLER

Sherry M. Abernathy
 SHERRY McDONOUGH ABERNATHY

Mark A. Cobb
 MARK A. COBB

STATE OF Alabama)
)
 COUNTY OF Jefferson)

ACKNOWLEDGEMENT

I, the undersigned, a Notary Public for the State at Large, hereby certify that MILDRED W. HOULDITCH, SELLER, whose name is signed to the foregoing Warranty Deed, who are known to me, acknowledged before me on this day that, being informed of the contents of the Deed, he/she executed the same voluntarily on the day the same bears date.

GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE on this the 26 day of November, 1999.

Randa A. Wooten
 NOTARY PUBLIC
 My Commission Expires

NOTARY PUBLIC STATE OF ALABAMA ALL RIGHTS
 MY COMMISSION EXPIRES 12/31/2000

STATE OF Alabama)
COUNTY OF Albany)

ACKNOWLEDGEMENT

I, the undersigned, a Notary Public for the State at Large, hereby certify that ELIZABETH W. BERTT, SELLER, whose name is signed to the foregoing Warranty Deed, who are known to me, acknowledged before me on this day that, being informed of the contents of the Deed, he/she executed the same voluntarily on the day the same bears date.

25th GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE on this the day of November, 1999.

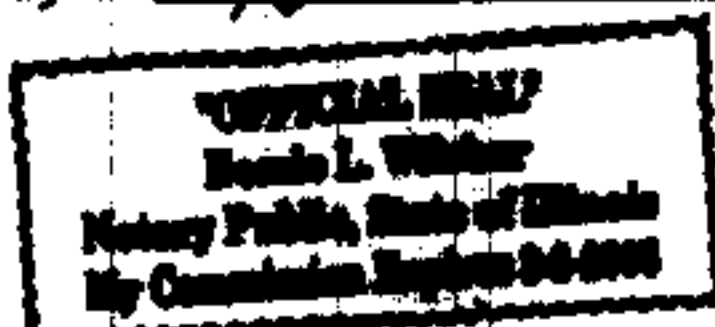
Jeff B. Davis
NOTARY PUBLIC
My Commission Expires:
My Commission Expires Sept. 30, 2001

STATE OF Illinois)
COUNTY OF Champaign)

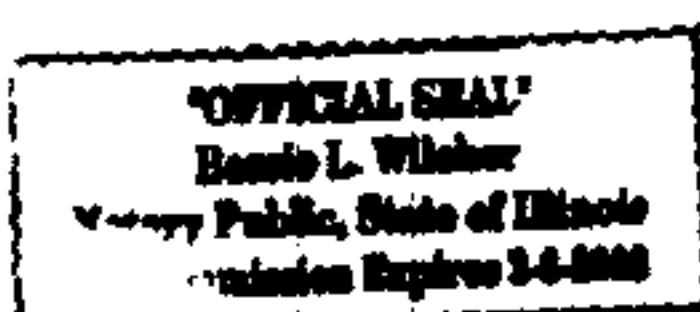
ACKNOWLEDGEMENT

I, the undersigned, a Notary Public for the State at Large, hereby certify that CHARLES K. WEST, SELLER, whose name is signed to the foregoing Warranty Deed, who are known to me, acknowledged before me on this day that, being informed of the contents of the Deed, he/she executed the same voluntarily on the day the same bears date.

6 GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE on this the day of June, 1999.



David J. Wilbur
NOTARY PUBLIC
My Commission Expires:



STATE OF Alabama)
COUNTY OF Albany)

ACKNOWLEDGEMENT

I, the undersigned, a Notary Public for the State at Large, hereby certify that JOE E. WEST, JR., SELLER, whose name is signed to the foregoing Warranty Deed, who are known to me, acknowledged before me on this day that, being informed of the contents of the Deed, he/she executed the same voluntarily on the day the same bears date.

25th GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE on this the day of November, 1999.

Jeff B. Davis
NOTARY PUBLIC
My Commission Expires:
My Commission Expires Sept. 30, 2001

STATE OF Alabama)
COUNTY OF Jefferson)

ACKNOWLEDGEMENT

I, the undersigned, a Notary Public for the State at Large, hereby certify that M. ANN W. LEE, SELLER, whose name is signed to the foregoing Warranty Deed, who are known to me, acknowledged before me on this day that, being informed of the contents of the Deed, he/she executed the same voluntarily on the day the same bears date.

GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE on this the 26 day of November, 1999.

Paula H. Walker
NOTARY PUBLIC
My Commission Expires:
NOTARY PUBLIC STATE OF ALABAMA AT LARGE
MY COMMISSION EXPIRES: June 26, 2001
BOND# 00000000000000000000000000000000

STATE OF Alabama)
COUNTY OF Jefferson)

ACKNOWLEDGEMENT

I, the undersigned, a Notary Public for the State at Large, hereby certify that JAMES ELBERT WEST, SELLER, whose name is signed to the foregoing Warranty Deed, who are known to me, acknowledged before me on this day that, being informed of the contents of the Deed, he/she executed the same voluntarily on the day the same bears date.

GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE on this the 26 day of November, 1999.

Paula H. Walker
NOTARY PUBLIC
My Commission Expires:
NOTARY PUBLIC STATE OF ALABAMA AT LARGE
MY COMMISSION EXPIRES: June 26, 2001
BOND# 00000000000000000000000000000000

STATE OF Ohio)
COUNTY OF Franklin)

ACKNOWLEDGEMENT

I, the undersigned, a Notary Public for the State at Large, hereby certify that EVELYN W. WYATT, SELLER, whose name is signed to the foregoing Warranty Deed, who are known to me, acknowledged before me on this day that, being informed of the contents of the Deed, he/she executed the same voluntarily on the day the same bears date.

6th GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE on this the January day of 1999 2000

Cynthia R. Carey
NOTARY PUBLIC
My Commission Expires:

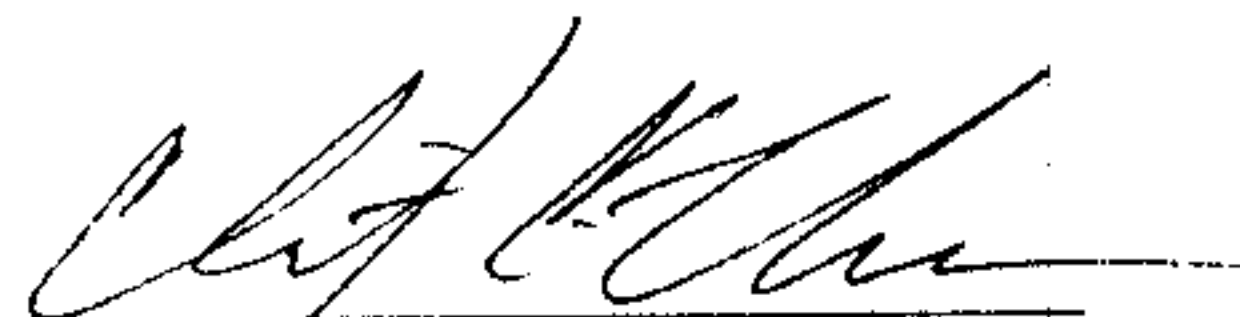
Cynthia R. Carey
Notary Public
My Commission Expires 8/25/2004

STATE OF ALABAMA)
COUNTY OF Shelby)

ACKNOWLEDGEMENT

I, the undersigned, a Notary Public for the State at Large, hereby certify that **JANICE C. STONE, SELLER**, whose name is signed to the foregoing Warranty Deed, who are known to me, acknowledged before me on this day that, being informed of the contents of the Deed, he/she executed the same voluntarily on the day the same bears date.

19 GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE on this the
day of NOV., 1999



NOTARY PUBLIC

My Commission Expires: 24 JAN, 2000

STATE OF Alabama)
COUNTY OF Shelby)

ACKNOWLEDGEMENT

I, the undersigned, a Notary Public for the State at Large, hereby certify that **MARK A. COBB, SELLER**, whose name is signed to the foregoing Warranty Deed, who are known to me, acknowledged before me on this day that, being informed of the contents of the Deed, he/she executed the same voluntarily on the day the same bears date.

27* GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE on this the
day of November, 1999



NOTARY PUBLIC

My Commission Expires: MY COMMISSION EXPIRES JULY 26, 2003

STATE OF Alabama)
COUNTY OF Shelby)

ACKNOWLEDGEMENT

I, the undersigned, a Notary Public for the State at Large, hereby certify that **SHERRY McDONOUGH ABERNATHY, SELLER**, whose name is signed to the foregoing Warranty Deed, who are known to me, acknowledged before me on this day that, being informed of the contents of the Deed, he/she executed the same voluntarily on the day the same bears date.

30 GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE on this the
day of NOV., 1999



NOTARY PUBLIC

My Commission Expires: 24 JAN, 2000

THIS INSTRUMENT PREPARED BY:

Clint C. Thomas
Attorney at Law
P.O. Box 1422
Calera, Alabama 35040

ALABAMA

Center for Health Statistics

The front of this document is pink and the back contains a watermark - 2000-02500

01/24/2000-02500
03:08 PM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
005 NHS 26.50

2000-02500

4397

CERTIFICATE OF DEATH
STATE OF ALABAMA

20406

THIS IS A
LEGAL
RECORD AND
WILL BE PER-
MANENTLY
FILEDSEE OTHER
SIDE
XXXXFILL IN
WITH A
TYPEWRITER
OR WRITE
PLAINLY
WITH DARK
INK. DO NOT
USE GREEN
NOR RED INK.
LEGAL COPIES
CANNOT BE
MADE IF
ENTRIES
ARE DIMALL ITEMS
MUST BE
COMPLETED
AND
ACCURATEIF NO DOCTOR
WAS IN
ATTENDANCE
MEDICAL CER-
TIFICATION
SHOULD BE
COMPLETED
BY THE LOCAL
HEALTH
OFFICER, OR
CORONER IF
HE IS A
PHYSICIAN OR
IF INQUEST
WAS HELD44-2X
VS-2

1. NAME OF DEATH & COUNTY Jefferson		2. SEX F	3. COLOR OR RACE W	4. MARRIED <input type="checkbox"/> NEVER MARRIED <input type="checkbox"/> WIDOWED <input checked="" type="checkbox"/> DIVORCED <input type="checkbox"/>	5. DATE OF BIRTH 3-13-1884	6. AGE (in years) 84	7. UNDER 1 YEAR <input type="checkbox"/> YEAR <input type="checkbox"/> IF UNDER 24 HRS. Months Days Hours Mins.
8. CITY, TOWN, OR LOCATION Birmingham Alabama		9. PLACE OF BIRTH INSIDE CITY LIMITS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		10. CITY, TOWN, OR LOCATION Calera Alabama 59016		11. RESIDENCE INSIDE CITY LIMITS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> ON A FARM? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
12. NAME OF HOSPITAL OR INSTITUTION East End Mem. Hospital		13. LENGTH OF STAY IN IS		14. STREET ADDRESS		15. DATE OF DEATH Aug. 9, 1968	
16. NAME OF DECEASED (Type or print) Mary West 230		17. NAME OF DEATH (Type or print) Mary West 230		18. DATE OF DEATH Aug. 9, 1968		19. AGE (in years) 84	
20. USUAL OCCUPATION (Give kind of work done during most of working life) Housewife		21. KIND OF BUSINESS OR INDUSTRY		22. BIRTHPLACE (State or foreign country) Alabama		23. CITIZEN OF WHAT COUNTRY? U.S.A.	
24. FATHER'S NAME Joe Mobley		25. MOTHER'S MAIDEN NAME UK.		26. NAME OF SURVIVING SPOUSE Deceased		27. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service)	
28. SOCIAL SECURITY NO.		29. INFORMANT'S NAME W.R. Cobb		30. ADDRESS Calera Alabama		31. CAUSE OF DEATH (Enter only one cause for (a), (b), and (c).) PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (a) <u>Cerebral vascular accident</u> Conditions, if any, which gave rise to above cause (b) <u>Hypertensive cardiovascular dis-</u> tressing the under-lying cause (c) <u>443X</u>	
32. PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE CONDITION GIVEN IN PART I(a)		33. INTERVAL BETWEEN ONSET AND DEATH 5 hrs		34. WAS AUTOPSY PERFORMED? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		35. (Probably) ACCIDENT SUICIDE HOMICIDE <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
36. TIME OF HOW MONTH, DAY, YEAR INJURY a. m. p. m.		37. PLACE OF INJURY (e. g., in or about home, farm, factory, street, office)		38. CITY, TOWN, OR LOCATION COUNTY STATE		39. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE WORK <input checked="" type="checkbox"/>	
40. I attended the deceased from death occurred at <u>July 11-68</u> to <u>8-9-68</u> and last saw him alive on <u>8-9-68</u>		41. SIGNATURE (Type or print) D. S. Harshbarger		42. SIGNATURE (Type or print) D. S. Harshbarger		43. DATE SIGNED 8/15/68	
44. USUAL CREMATION OR REMOVAL (Specify) Burial		45. DATE 8-11-68		46. NAME OF CEMETERY OR CREMATORY Salem		47. LOCATION (City, town, or county) (State) Calera Alabama	
48. FUNERAL DIRECTOR Bolton-Brown Service		49. ADDRESS Columbiana Alabama		50. DATE USED BY LOCAL REG. AUG 20 1968		51. REGISTRAR'S SIGNATURE L. E. Harshbarger	

I, Dorothy S. Harshbarger, State Registrar of Health Statistics, certify this is a true and exact copy of the original certificate filed in the Center for Health Statistics, State of Alabama, Department of Public Health, Montgomery, Alabama, and have caused the official seal of the Center for Health Statistics to be affixed. 1997-317-892-7

Dorothy S. Harshbarger
Dorothy S. Harshbarger, State Registrar

August 28, 1997