

Affidavit of Estate Tax

IT: AFF-1 (6/01)

(To be recorded in the county of residence of the decedent)

Inst # 2002-09748

02/28/2002-09748
10:48 AM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
001 MEL 11.00

(this space available for case style of estate probate proceeding)

(for official use only)

STATE OF Alabama
COUNTY OF Shelby

I, the undersigned, Ida Mae Cumberland and Dawn Wilson Hobbs POA, do hereby state:
(print name of personal representative)

1. I am the Personal Representative as defined in Section 8-6-140(5), **Code of Alabama 1975**, as the case may be, of the Estate of William Mason Cumberland, Sr.
(print name of decedent)
2. The decedent referenced above, whose Social Security Number is [REDACTED] died on 10 / 03 / 00, and was domiciled, as defined in *Caheen vs. Caheen*, 233 Ala. 494, 172 So. 618 (1937), at the time of death, at BMC Princeton in the county of Jefferson and state of Alabama.

On date of death, the decedent was (check one): ☒ a U.S. citizen ☐ not a U.S. citizen.

3. The value of the gross estate is approximately \$ 600,000.00.
4. A federal estate tax return (federal Form 706 or 706-NA) (check one):

☒ is not required ☐ is required to be filed for the Estate.

5. The undersigned, as personal representative, acknowledges his/her tax liability for any tax later determined to be due by the estate.

Under penalties of perjury, I declare that I have read this Affidavit and that the facts stated are true. This form is being filed in accordance with Section 40-15-13, **Code of Alabama 1975**.

Executed this 20 day of February, 20 02.

Signature: Ida Mae Cumberland
Dawn Wilson Hobbs POA
Print Name: Ida Mae Cumberland, Dawn Wilson Hobbs POA
Mailing Address: 2936 Coabridge Lane
Birmingham, AL 35242
Telephone: (205) 995-5642

STATE OF Alabama
COUNTY OF Jefferson

Sworn to (or affirmed) and subscribed before me by Dawn Wilson Hobbs
on this 20th day of February, 20 02.

Signature of Notary: Debra C. Fields

Personally Known

Or Produced Identification ✓

Type of Identification Produced Drivers License

My Commission Expires 6/4/03

Debra C. Fields

(Print, Type, or Stamp Name of Notary)