

STATE OF ALABAMA
COUNTY OF SHELBY

AFFIDAVIT

Before me, the undersigned authority, personally appeared Rosia Dowdell, who, being known to me and being by me first duly sworn, deposed and said as follows:

My name is Rosia Dowdell. I am an adult citizen, resident of Shelby County, Alabama, and have personal knowledge of the facts stated in this affidavit. I have known the family of Young Green, Jr. and his wife, Mary Green, for many years. Young Green, Jr. died in October 2006. Mary Green died recently on July 20, 2012. To my knowledge, Mary Green died without a will, and ownership of her property passed to her children. Mary Green had four children, all of whom survived her. Their names are Stephanie Sawyer-Miller, Paula Percival, Reginald Green, and Regina Green Johnson. Mary Green did not have any other children.

The purpose of this affidavit is to name the heirs of Mary Green so that there may be a record showing ownership of her property, in particular the real property owned by Young Green, Jr. and Mary Green as joint tenants with right of survivorship as shown by the deed recorded in Deed Book 258, page 697, in the Probate Office of Shelby County, Alabama. A copy of that deed is attached to this affidavit.


Rosia Dowdell

Sworn to and subscribed this 31 day of
July, 2012.


Notary public


20120731000279160 1/3 \$18.00
Shelby Cnty Judge of Probate, AL
07/31/2012 04:31:46 PM FILED/CERT

My Commission Expires Dec. 19, 2015

This instrument was prepared by

(Name) WALLACE & ELLIS, ATTORNEYS

(Address) COLUMBIANA, ALABAMA

Form 1-1-5 Rev. 1-55

WARRANTY DEED, JOINTLY FOR LIFE WITH REMAINDER TO SURVIVOR—LAWYERS TITLE INSURANCE CORPORATION, Birmingham, Alabama

STATE OF ALABAMA

SHELBY

COUNTY

KNOW ALL MEN BY THESE PRESENTS,

That in consideration of NINE THOUSAND AND NO/100 DOLLARS

to the undersigned grantor or grantors in hand paid by the GRANTEES herein, the receipt whereof is acknowledged, we,

Freddie Lee Hayes and wife, Ruth Hayes

(herein referred to as grantors) do grant, bargain, sell and convey unto

Young Green, Jr. and wife, Mary Green

(herein referred to as GRANTEES) for and during their joint lives and upon the death of either of them, then to the survivor of them in fee simple, together with every contingent remainder and right of reversion, the following described real estate situated in Shelby County, Alabama to-wit:

A part of the SW $\frac{1}{4}$ of NW $\frac{1}{4}$ of Section 1, Township 21 South, Range 3 West, described as follows: Commencing at the SE corner of SW $\frac{1}{4}$ of NW $\frac{1}{4}$ of said Section 1, and run North 44 deg. 30 min. West 424 feet; thence run North 29 deg. 30 min. West 263 feet to point of beginning of lot herein described; thence run North 17 deg. 30 min. West 210 feet; thence run North 71 deg. 30 min. East 105 feet; thence run South 17 deg. 30 min. East 210 feet; thence run South 71 deg. 30 min. West 105 feet to point of beginning, containing 1/2 acre, more or less.

STATE OF ALABAMA
SHELBY COUNTY
JUL 18 1969
JUDGE OF PROBATE
RECEIVED
JUL 18 1969
JUDGE OF PROBATE

TO HAVE AND TO HOLD to the said GRANTEES for and during their joint lives and upon the death of either of them, then to the survivor of them in fee simple; and to the heirs and assigns of such survivor forever, together with every contingent remainder and right of reversion.

And I (we) do for myself (ourselves) and for my (our) heirs, executors, and administrators covenant with the said GRANTEES, their heirs and assigns, that I am (we are) lawfully seized in fee simple of said premises; that they are free from all encumbrances, unless otherwise noted above; that I (we) have a good right to sell and convey the same as aforesaid; that I (we) will and my (our) heirs, executors and administrators shall warrant and defend the same to the said GRANTEES, their heirs and assigns forever, against the lawful claims of all persons.

IN WITNESS WHEREOF, we have hereunto set our hand(s) and seal(s), this 18 day of July, 1969.

WITNESS:

(Seal) Mr. Freddie L. Hayes (Seal)
(Seal) Mrs. Ruth Hayes (Seal)
(Seal) _____ (Seal)

STATE OF ALABAMA

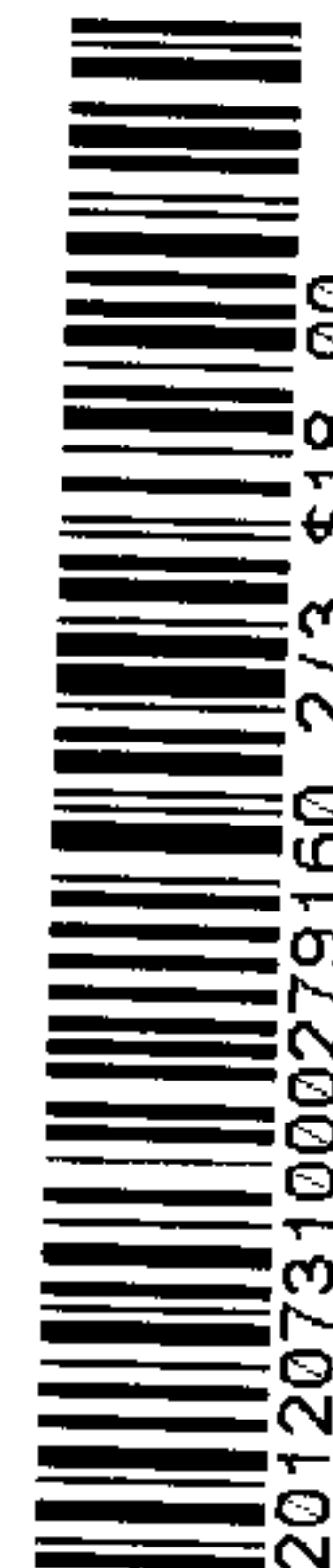
SHELBY

COUNTY

General Acknowledgment

I, _____, the undersigned authority _____, a Notary Public in and for said County, in said State, do hereby certify that Freddie Lee Hayes and wife, Ruth Hayes whose names are signed to the foregoing conveyance, and who are known to me, acknowledged before me on this 18 day of July, 1969, that being informed of the contents of the conveyance they executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this 18 day of July, A. D. 1969.
Lannie Graster
Notary Public.



20120731000279160 2/3 \$18.00
Shelby Cnty Judge of Probate, AL
07/31/2012 04:31:46 PM FILED/CERT

TYPE IN PERMANENT
BLACK INK. DO NOT
USE GREEN, RED, OR
BLUE INK.

ALABAMA

CERTIFICATE OF DEATH

County
File
Number —

State File Number 101

1. DECEASED—NAME First Middle Last (Type last name all capitals) Mary Ann Green			2. DATE OF DEATH (Month, Day, Year) July 20, 2012		3. COUNTY OF DEATH Shelby		
4. CITY, TOWN, OR LOCATION OF DEATH AND ZIP CODE Alabaster, 35007			5. INSIDE CITY LIMITS (Specify Yes or No) Yes		6. PLACE OF DEATH—HOSPITAL OR OTHER INSTITUTION—(If not in either, give street and number) Chandler Health and Rehab Center		
7. IF HOSPITAL (Specify Inpatient, ER or Outpatient, DOA)			8. OF HISPANIC ORIGIN (Specify Yes or No) If Yes, Specify Cuban, Mexican, Puerto Rican, etc. No		9. RACE—(Specify American Indian, Black, White, etc.) Black		
10. SEX Female			11. AGE 72 YRS		12. UNDER 1 YEAR MOS. DAYS HOURS MINS.		
13. DATE OF BIRTH (Month, Day, Year) June 12, 1940			14. DECEASED'S SOCIAL SECURITY NUMBER		15. EDUCATION (Specify ONLY highest grade completed below) Elementary or High School (0-12) 12 College (14 or 5+) 3		
16. MARITAL STATUS (Specify Married, Never Married, Widowed, Divorced) Widowed			17. SURVIVING SPOUSE (If wife, give maiden name)		18. Was Decedent ever in Armed Forces (Specify Yes or No) No		
19. STATE OF BIRTH (If not in USA, name country) Alabama		20. RESIDENCE—STATE Alabama		21. COUNTY Shelby		22. CITY, TOWN, OR LOCATION AND ZIP CODE Alabaster, 35007	
23. INSIDE CITY LIMITS (Specify Yes or No) Yes		24. STREET AND NUMBER 100 3rd Court SE		25. INFORMANT—Name and Address Paula Percival, 4615 Summer PL Pkwy, Birmingham, AL 35244			
26. USUAL OCCUPATION (Give kind of work done during most of working life even if retired) Phlebotomist			27. KIND OF BUSINESS OR INDUSTRY Medical				
28. FATHER—NAME First Middle Last Stoten Sawyer			29. MAIDEN NAME OF MOTHER—First Middle Last Stella Dewberry				
30. DISPOSITION OF BODY (Specify Burial, Cremation, Medical Donation, Hospital Disposal, Other) Burial		31. DATE OF DISPOSITION (Month, Day, Year) Jul. 28, 2012		32. CEMETERY OR CREMATORY—Name Cemetery Elliottsville		33. LOCATION—(City or Town—State) Alabaster, AL	
34. FUNERAL HOME—Name and Address Charter Funeral Home 2521 US Hwy 31, Calera, AL 35040			35. FUNERAL DIRECTOR—Signature <i>Sharon Smiley</i>		36. DATE SIGNED BY FUNERAL DIRECTOR Jul. 28, 2012		
37. ☒ Certifying Physician (Physician certifying cause of death) "To the best of my knowledge death occurred at the time and date, and due to the cause(s) and manner stated." ☐ Medical Examiner—Coroner "On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, place, and due to the cause(s) and manner stated." Signature: <i>Dilip V. Shah</i>			38. DATE SIGNED (Month, Day, Year) 7/25/12		39. TIME AND DATE OF DEATH 11:05 PM 7/20/12		
40. DATE AND TIME PRONOUNCED DEAD (For Coroner/M.E. use only)			41. NAME AND TITLE OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 45) DILIP V. SHAH M.D.		42. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 45) 1004 1ST STREET N. ALABASTER, AL 35007		
43. CERTIFIER LICENSE NUMBER 13145			44. REGISTRAR—Signature <i>Shirley Keller</i>		45. DATE FILED (Month, Day, Year) July 30, 2012		

NAME OF DECEASED Mary Ann Green

20120731000279160 3/3 \$18.00
Shelby Cnty Judge of Probate, AL
07/31/2012 04:31:46 PM FILED/CERT

This is a legal record and must be filed within five (5) days after death.

ADPH-HS 2/Rev 11-93

This is a true and exact copy of the record on file with the Shelby County Health Department

Signature of Local Registrar

Date of Issue