AFFIDAVIT OF FACTS

STATE OF ALABAMA §
§
COUNTY OF SHELBY §

BEFORE ME, the undersigned authority, on this day personally appeared the undersigned affiant, who swore on oath that the following facts are true:

"1. My name is Brenda Dover, I am of sound mind, capable of making this affidavit, and fully competent to testify to the matters stated herein, and I have personal knowledge of each of the matters stated herein.

"2. That Billy Dover., joint tenant - now deceased, and I were the record title holders of the following described property, as evidenced by that Deed recorded in Deed Book 20021227000646, among the land Records of Shelby County, Alabama, to wit:

"3. That the joint tenant died on, June 11,2007.

"4. That the value of the joint tenant's estate was insufficient to necessitate the filing of an estate tax return and that there are no state or federal estate or inheritance tax due as a result of his or her death.

"5. That Affiant gives this Affidavit fro the purpose of inducing Fidelity National Title Insurance Company to issue its policy or policies insuring the title to said property without exceptions(s) to encumbrance(s) or vesting issues; and said Affiant does hereby agree to indemnify and hold Fidelity National Title Insurance Company harmless of and from any and all loss, cost, damage and expense of every kind, including Attorneys' fees, which it may suffer or incur or become liable for under its said policy or policies."

FURTHER THE AFFIANTS SAYETH NAUGHT.

Brenda Dover (SEAL)
Brenda Dover

Executed, subscribed and sworn to before me the day and year above written.

Notary Public

My Commission expires: 2-11-15

BRANDON CORRIAN McCLAIN
NOTARY PUBLIC
STATE OF ALABAMA
COMM. EXP. 7-11-2015

THE FRONT OF THIS DOCUMENT IS PINK - THE BACK OF THIS DOCUMENT IS BLUE AND HAS AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

ALABAMA
Center for Health Statistics
ALABAMA
CERTIFICATE OF DEATH

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

County File Number 07 059883 — State File Number 101 07-20639

1. DECEASED—NAME: First Billy; Middle Joe; Last DOVER
2. DATE OF DEATH (Month, Day, Year): June 11, 2007
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): No
6. PLACE OF DEATH—HOSPITAL OR OTHER INSTITUTION—(If not in either, give street and number): 485 Shelby County Highway 26
7. IF HOSPITAL (Specify Inpatient, ER or Outpatient, DOA):
8. WAS HISPANIC ORIGIN? (Specify Yes or No) If Yes, Specify Cuban, Mexican, Puerto Rican, etc.: No
9. RACE—(Specify American Indian, Black, White, etc.): White
10. SEX: Male
11. AGE: 69 YRS.
12. UNDER 1 YEAR: MOS. DAYS
UNDER 1 DAY: HOURS MINS.
13. DATE OF BIRTH (Month, Day, Year): February 4, 1938
14. DECEASED'S SOCIAL SECURITY NUMBER: [redacted]
15. EDUCATION (Specify ONLY highest grade completed below): Elementary or High School (0-12): 12; College (1-4 or 5+):
16. MARITAL STATUS (Specify Married, Never Married, Widowed, Divorced): Married
17. SURVIVING SPOUSE (If wife, give maiden name): Brenda J. Rowe
18. Was Deceased ever in U.S. 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): No
24. STREET AND NUMBER: 485 Shelby County Hwy 26
25. INFORMANT—Name and Address: Brenda Dover, 485 Shelby County Highway 26, Alabaster, AL 35007
26. USUAL OCCUPATION (Give kind of work done during most of working life even if retired): Production Manager
27. KIND OF BUSINESS OR INDUSTRY: Surface Mining
28. FATHER—NAME: First Havis; Middle L.; Last Dover
29. MAIDEN NAME OF MOTHER: First Mary; Middle Evelyn; Last Nelson
30. DISPOSITION OF BODY (Specify Burial, Cremation, Medical Donation, Hospital Disposal, Other): Burial
31. DATE OF DISPOSITION (Month, Day, Year): Jun.14,2007
32. CEMETERY OR CREMATORY—Name: Nabors Cemetery
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: Brenda Dover
36. DATE SIGNED BY FUNERAL DIRECTOR: Jun.14,2007
37. Certifying Physician: [Physician certifying cause of death] "To the best of my knowledge, death occurred at the time, date, and due to the cause(s) and manner stated." — Medical Examiner X 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: Diana S. Hawkins
38. DATE SIGNED (Month, Day, Year): June 22, 2007
39. TIME AND DATE OF DEATH: 09:15 06-11-07
40. DATE AND TIME PRONOUNCED DEAD (For Coroner/M.E. use only): 06-11-07 09:15
41. NAME AND TITLE OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 46): Diana S. Hawkins-Coroner
42. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 46): P.O. Box 1321 Columbiana, Ala. 35051
43. CERTIFIER'S LICENSE NUMBER:
44. REGISTRAR— Signature: Sheila Miller
For State or County use only
45. DATE FILED (Month, Day, Year): June 25, 2007

MEDICAL CERTIFICATION

46. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. LIST ONLY ONE CAUSE ON EACH LINE.

		Approximate Interval Between Onset and Death
Immediate Cause (Final disease or condition resulting in death) →	a. Complications of Cardiovascular Disease	years
Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST.	b. DUE TO (OR AS A CONSEQUENCE OF): Diabetes	years
	c. DUE TO (OR AS A CONSEQUENCE OF): Hypertension	years
	d. DUE TO (OR AS A CONSEQUENCE OF):	

47. PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.

48. WAS THERE A PREGNANCY IN LAST 42 DAYS? (Specify Yes, No, or Unk.):

49. MANNER OF DEATH (Specify—Accident, Homicide, Suicide, Undetermined Circumstances, Pending Investigation, Natural Cause): Natural Cause
50. AUTOPSY (Specify Yes or No): no
51. If yes, were findings considered in determining cause of death? (Specify Yes or No):
52. HOW INJURY OCCURRED (Enter nature of injury as Item 46, Part I or Item 47, Part II):
53. DATE OF INJURY (Month, Day, Year):
54. HOUR OF INJURY: AM
55. INJURY AT WORK (Specify Yes or No):
56. PLACE OF INJURY—(Specify if home, farm, street, factory, office building, etc.):
57. LOCATION OF INJURY (Street or R.F.D. No., City or Town, State):

This is a legal record and must be filed within five (5) days after death. ADPH-VS-2/Rev. 11-93

JUN 27 2007

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. 2007-371-872-7

July 17, 2007

Dorothy S. Harshbarger, State Registrar

ANY ALTERATIONS VOID THIS DOCUMENT

SSN: [redacted]

NAME OF DECEASED Billy Joe Dover

46. MD
49.
55.

SCHEDULE "A"

A PART OF THE E1/2 OF E1/2 OF W1/2 OF NW 1/4 OF SECTION 17, TOWNSHIP 21, RANGE 2 WEST DESCRIBED AS BEGINNING AT A POINT ON THE NORTH LINE OF THE COLUMBIANA ROAD AND ON THE EAST LINE OF THE NW 1/4 OF NW 1/4 OF SAID SECTION 17 AND RUN NORTH ALONG SAID EAST LINE 135 FEET; THENCE WESTERLY AND PARALLEL WITH THE SAID COLUMBIANA ROAD 250 FEET; THENCE SOUTH, AND PARALLEL WITH THE EAST LINE OF SAID W 1/2 OF NW 1/4 135 FEET TO THE NORTH LINE OF SAID ROAD; THENCE EAST WITH THE EAST LINE OF SAID W 1/2 OF NW 1/4 135 FEET TO THE NORTH LINE OF SAID ROAD THENCE EAST ALONG ROAD TO THE POINT OF BEGINNING.

BEING THE SAME PROPERTY CONVEYED TO BRENDA DOVER AND HUSBAND BILLY DOVER BY DEED FROM ALICE N. JONES, AN UNMARRIED WOMAN RECORDED 12/27/2002 IN DEED INSTRUMENT 20021227000646 33, IN THE PROBATE JUDGE'S OFFICE FOR SHELBY COUNTY, ALABAMA.

TAX ID# 22-4-17-0-000-004-000

SHELBY COUNTY ALABAMA

Filed and Recorded
Official Public Records
Judge James W. Fuhrmeister, Probate Judge,
County Clerk
Shelby County, AL
01/06/2014 10:08:31 AM
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