

*Filed
12.23.10
10:55 AM
Jeanette Bell
Deputy Clerk*

STATE OF NORTH CAROLINA
COUNTY OF ORANGE

LAST WILL AND TESTAMENT

I, ELIZABETH ANANIA EDWARDS, of Orange County, North Carolina, do hereby revoke all Wills and Codicils heretofore made by me and do hereby make, publish and declare this my Last Will and Testament in the form and manner as follows:

ARTICLE I

I direct that all my just debts, my funeral expenses (including the cost of a suitable grave marker), the expense of my last illness, and the costs of administering my estate be paid out of the assets of my estate as soon as practicable after my death.

ARTICLE II

I direct that all estate and inheritance taxes and other taxes in the general nature thereof (together with any interest or penalty thereon) which shall become payable upon or by reason of my death with respect to any property passing by or under the terms of this Will or any Codicil to it hereafter executed by me, or with respect to any other property included in my gross estate for the purpose of such taxes (including life insurance proceeds) shall be paid by my Executor out of my residuary estate, without apportionment.

ARTICLE III

I appoint my daughter, CATHARINE ELIZABETH EDWARDS, to be the Executor of this my Last Will and Testament, and I direct that no bond be required of her as Executor. If my daughter shall not survive me or for any reason shall not serve as Executor, or, having qualified, shall die resign, I appoint BARBARA B. WEYHER to

be the Executor of this my Last Will and Testament, and I direct that no bond be required for her as executor.

If I am the surviving parent of any child of mine who shall be a minor at the time of my death, I appoint my daughter, CATHARINE ELIZABETH EDWARDS, to be the guardian of the person of any of my minor children, and I direct that no bond be required of her as guardian.

ARTICLE IV

All of my furniture, furnishings, household goods, jewelry, china, silverware and personal effects and any automobiles owned by me at the time of my death I give and bequeath to my children who shall be living at the time of my death and to the living issue of any deceased child per stirpes, to be divided among them with such equality and appropriateness as my Executor, in her sole discretion, shall determine.

If any beneficiary of property under this Article shall be a minor, the minor's share may be delivered to the person with whom the minor is residing, or to the minor's legal guardian, or directly to the minor. The receipt of the guardian, or the person with whom the minor resides, or the receipt of the minor shall constitute a full acquittance of my Executor with respect to the property so delivered. This authority is given my Executor notwithstanding any statute or rule of law to the contrary. I direct that any expenses incurred in safeguarding or delivering such property be paid from my estate as an administrative expense thereof.

ARTICLE V

I bequeath and devise and appoint all the residue and remainder of my property and estate of every nature and wheresoever situated, hereinafter referred to as my residuary estate, to CATHARINE ELIZABETH EDWARDS, or to the then acting Trustee, in trust, as an addition to the property held by her as Trustee under the terms of a certain Revocable Declaration of Trust, entered into by me, as Grantor and Trustee, dated December 2, 1992, but amended and restated prior to the execution of this Will, to be a part of the trust and to be managed in accordance with the terms and provisions of the Revocable Declaration of Trust as amended and restated.

ARTICLE VI

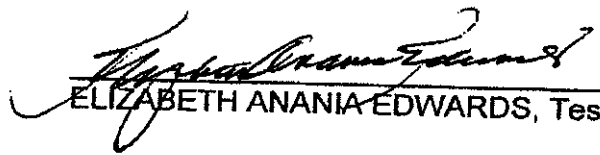
I hereby grant to my Executor, including any substitute or successor personal representative, the continuing absolute, discretionary power to deal with any property, real or personal, held in my estate, as freely as I might in the handling of my own affairs. Such power may be exercised independently and without prior or subsequent approval of any court or judicial authority, and no person dealing with my Executor shall be required to inquire into the propriety of any of her actions.

Subject to North Carolina General Statutes, Section 32-26, I hereby grant to my Executor all the powers set forth in North Carolina General Statutes, Section 32-27, and these powers are hereby incorporated by reference and made a part of this instrument, and such powers are intended to be in addition to and not in substitution of the powers conferred by law.

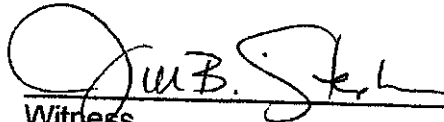
ARTICLE VII

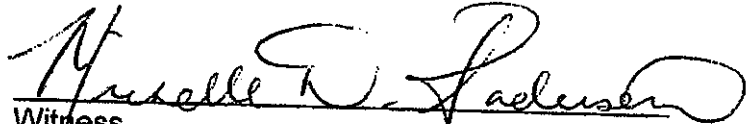
I have three living children, CATHARINE ELIZABETH EDWARDS, EMMA CLAIRE EDWARDS and JOHN ATTICUS EDWARDS. As used in this Will, the term "issue" shall include adopted and afterborn issue. Where required by context in this Will, the masculine and feminine genders shall be deemed to include the other gender; the singular shall be deemed to include the plural, and the plural the singular.

IN TESTIMONY WHEREOF, I, ELIZABETH ANANIA EDWARDS, sign my name to this instrument, this 1st day of ~~October~~ ^{December} ~~2010~~ ^{BC}, and being duly sworn, do hereby declare to the undersigned authority that I sign and execute this instrument as my Last Will and Testament, that I sign it willingly, that I execute it as my free and voluntary act for the purposes therein expressed, and that I am eighteen (18) years of age or older, of sound mind, and under no constraint or undue influence.

 (SEAL)
ELIZABETH ANANIA EDWARDS, Testator

We, the undersigned witnesses, sign our names to this instrument, being first duly sworn, and do hereby declare to the undersigned authority that the Testator signs and executes this instrument as her Last Will and Testament and that she signs it willingly, and that each of us, in the presence and hearing of the Testator, hereby signs this Will as witness to the Testator's signing, and that to the best of our knowledge the Testator is eighteen (18) years of age or older, of sound mind, and under no constraint or undue influence.


Witness


Witness

STATE OF NORTH CAROLINA

COUNTY OF ORANGE

Subscribed, sworn to and acknowledged before me by ELIZABETH ANANIA EDWARDS, the Testator, and subscribed and sworn to before me by

Jill B. STEPHENS and Michelle D. Anderson

Witnesses, this 12th day of ~~October~~, 2010. bc
December

(Notary Seal)

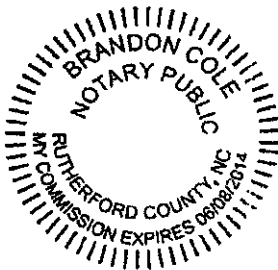
BJC

Notary Public

Brandon Cole

Type or print name

My Commission Expires: 6/8/14



(TYPE OR PRINT IN BLACK INK)
STATE OF NORTH CAROLINA

File No.

10 E 589

In The General Court Of Justice
Before the Clerk

ORANGE County

FILED

IN THE MATTER OF THE ESTATE OF:

Name Of Decedent
ELIZABETH ANANIA EDWARDS
Date Of Death
12-07-2010
Decedent's Social Security Number (Last Four Digits)
9501

2010 DEC 22 P 3:02
ESTATE TAX CERTIFICATION
(FOR DECEDENTS DYING ON OR AFTER 1/1/99)
ORANGE COUNTY, N.C.
BY 
G.S. 28A-21-2; -25-3;105-32.2

DEC 22 2010

NOTE: Use this form for decedents dying on or after 1/1/99. For decedent's dying before 1/1/99, use AOC-E-207.

I, the personal representative/fiduciary/spouse in the above estate, certify that:

- 1. a. The gross value of the estate prior to the date of the decedent's death is less than:
 - \$650,000 (If decedent died on or after 1/1/1999).
 - \$675,000 (If decedent died on or after 1/1/2000).
 - \$1,000,000 (If decedent died on or after 1/1/2002).
 - \$1,500,000 (If decedent died on or after 1/1/2004).
 - \$2,000,000 (If decedent died on or after 1/1/2006).
 - \$3,500,000 (If decedent died on or after 1/1/2009).

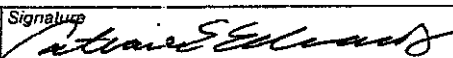
b. The above named decedent died on or after 1/1/2010 and on or before 12/31/2010, during which time no federal estate taxes are applicable or due.

2. I am the surviving spouse and sole heir of the decedent and no North Carolina estate taxes are due.

SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME

SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME

Date
12-22-2010

Signature


Date
Signature


Title Of Personal Representative/Fiduciary/Spouse
EXECUTRIX

Title Of Personal Representative/Fiduciary/Spouse

Address Of Personal Representative/Fiduciar //Spouse
3012 O STREET NW
WASHINGTON DC 20007

Address Of Personal Representative/Fiduciary/Spouse

Date
12-22-2010

Signature Of Person Authorized To Administer Oaths


Date
Signature Of Person Authorized To Administer Oaths

Deputy CSC Assistant CSC Clerk Of Superior Court

Deputy CSC Assistant CSC Clerk Of Superior Court

Notary Date My Commission Expires

Date My Commission Expires Notary

SEAL

County Where Notarized

County Where Notarized

SEAL

NOTE TO PERSONAL REPRESENTATIVE/FIDUCIARY/SPOUSE AND CLERK:

No final accounting of an estate may be approved unless the personal representative files with the Clerk of Superior Court an Estate Tax Certification, AOC-E-212, or a certificate issued by the Secretary of Revenue stating the estate tax liability has been satisfied. G.S. 105-32.3(c).

Original-File Copy-Taxpayer

(TYPE OR PRINT IN BLACK INK)
STATE OF NORTH CAROLINA

File No. 10 E 589

FILED

In The General Court Of Justice
Superior Court Division
Before The Clerk

Orange County

2010 DEC 22 12 3 02

IN THE MATTER OF THE ESTATE OF:

Name, Street Address, City, State And Zip Code Of Decedent
Elizabeth Anania Edwards
1201 Old Greensboro Road
Chapel Hill, NC 27516

ORANGE COUNTY CSC

APPLICATION

FOR PROBATE AND LETTERS

DEC 20 2010

BY

TESTAMENTARY OF ADMINISTRATION CTA

Social Security No. (Last Four Digits)
9501

County Of Domicile At Time Of Death
Orange

G.S. 28A-6-1; 28A-12-4; 31-16; 105-22

Date Of Death
12/7/2010

Date Of Will And Codicil(s) If Any
12/01/2010

Place Of Death (If Different From County Of Domicile)

Name, Street Address, PO Box, City, State And Zip Code Of Applicant
Catharine Elizabeth Edwards
3012 O Street NW
Washington, DC 20007

Name, Street Address, PO Box, City, State And Zip Code Of Co-Applicant

Telephone No.

Telephone No.

Telephone No.
919.345.3432

Legal Residence (County, State)
District of Columbia

Legal Residence (County, State)

Name, Street Address, PO Box, City, State And Zip Code Of Attorney
Maria M. Lynch
Lynch & Eatman, L.L.P.
P. O. Box 30515
Raleigh, NC 27622-0515

Attorney Bar No.
8876
Telephone No.
(919) 571-3332

- I, the undersigned, applying for probate and for letters in the above estate, being first duly sworn, say that:
- The decedent was domiciled in this county at the time of the decedent's death, or left property or assets in this county, or was a nonresident motorist who died in North Carolina; no other proceeding for probate or for administration is pending in any jurisdiction.
 - The decedent left the paper-writing(s) purporting to be the decedent's Last Will and Testament and codicil(s), dated as shown above.
 - a. I am an executor, devisee or legatee named in the will, or a next-of-kin or creditor of the decedent.
 b. I am the person entitled to apply for letters or am applying after all persons having prior right to apply have renounced.
 c. I am applying subject to G.S. 28A-6-2(1) and move that all necessary citations be issued.
 d. I am the public administrator appointed by the Court.
 - I am not disqualified pursuant to G.S. 28A-4-2 to administer the estate and have not renounced my right to do so.
 - Following the execution of the will there were no children born to or adopted by the decedent, and the decedent did not thereafter marry or obtain a divorce. (If the facts are otherwise, state them on an attachment.)
 - After diligent inquiry, I have determined that the persons listed below are all the persons entitled to share in the decedent's estate. (If there is a court-appointed guardian for any such person(s), list the guardian's name and address on an attachment.)

NAME	AGE	RELATIONSHIP	MAILING ADDRESS
Catharine Elizabeth Edwards	18+	Daughter	3012 O Street NW, Washington, DC 20007
Emma Claire Edwards, c/o John Edwards	12	Daughter	1201 Old Greensboro, Chapel Hill, NC 27516
John Atticus Edwards, c/o John Edwards	10	Son	1201 Old Greensboro, Chapel Hill, NC 27516
Catharine Elizabeth Edwards, Trustee of Elizabeth	18+	Trustee	3012 O Street NW, Washington, DC 20007
Anania Edwards Trust dated 12/2/1992 as amended			

PRELIMINARY INVENTORY

(Give values as of date of decedent's death. Continue on separate attachment if necessary.)

PART I. PROPERTY OF THE ESTATE

		Est. Market Value
1. Accounts in sole name of decedent (List bank, etc., each account no. and balance.)		
USAA Federal Savings Account		\$ 6,000.00
2. Joint accounts <u>without</u> right of survivorship (List bank, etc., each account no., balance and joint owners.)		
	% Owned By Dec.	
	% Owned By Dec.	
	% Owned By Dec.	
	% Owned By Dec.	
3. Stocks/bonds/securities in sole name of decedent or jointly owned <u>without</u> right of survivorship		
	% Owned By Dec.	250,000.00
4. Cash and undeposited checks on hand		
5. Household furnishings		20,000.00
6. Farm products, livestock, equipment and tools		
7. Vehicles		20,000.00
8. Interest in partnership or sole proprietor businesses		200,000.00
9. Insurance, Retirement Plan, I.R.A., etc., payable to Estate		
10. Notes, judgments, and other debts due decedent		
11. Miscellaneous personal property		
12. Real estate willed to the Estate		\$
13. Estimated annual income of Estate		

(Base bond on this amount, if applicable.) **TOTAL PART I.** \$ 496,000.00


PART II. PROPERTY WHICH CAN BE ADDED TO ESTATE IF NEEDED TO PAY CLAIMS

1. Joint accounts with right of survivorship (List bank, etc., each account no., balance & joint owners.)		\$
2. Stocks/bonds/securities registered in beneficiary form and immediately transferred on death or jointly owned with right of survivorship		
3. Other personal property recoverable (G.S. 28A-15-10)		
4. Real estate owned by decedent and not listed elsewhere		1,000,000.00

TOTAL PART II. \$ 1,000,000.00

PART III. OTHER PROPERTY

- There is is not entireties real estate owned by decedent and spouse
- There are are not insurance, Retirement Plan, I.R.A. accounts, annuities etc., payable to named beneficiaries
- There is is not a potential claim for wrongful death arising under G.S. 28A-18.2

Signature Of Applicant


Signature Of Co-Applicant

SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME

SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME

Date: 12-22-10
 Signature Of Person Authorized To Administer Oaths: Jeanette Williams

Date: _____
 Signature Of Person Authorized To Administer Oaths: _____

Deputy CSC Assistant CSC Clerk Of Superior Court

Deputy CSC Assistant CSC Clerk Of Superior Court

Notary
 Date Commission Expires: _____

Date Commission Expires: _____
 Notary

SEAL
 County Where Notarized: Wake

SEAL
 County Where Notarized: _____

STATE OF NORTH CAROLINA

File No.

10 E 589

Orange County

FILED

In The General Court Of Justice
Superior Court Division
Before The Clerk

IN THE MATTER OF THE ESTATE OF: 2010 DEC 22 P 3: 03

Name Of Decedent/Minor/Incompetent/Trust:
Elizabeth Anania Edwards

ORANGE COUNTY, N.C. Constitution, Art. VI., Sec. 7; G.S.11-7, 11-11; 28A-7-1

OATH/AFFIRMATION

I, the undersigned, do solemnly swear affirm that I will support and maintain the Constitution and laws of the United States, and the Constitution and laws of North Carolina not inconsistent therewith; that I will be faithful and bear true allegiance to the State of North Carolina, and to the constitutional powers and authorities which are or may be established for the government thereof; and that I will endeavor to support, maintain and defend the Constitution of said State, not inconsistent with the Constitution of the United States, to the best of my knowledge and ability; and that I will faithfully discharge the duties of my office as indicated below;

so help me, God. and this is my solemn affirmation.

(check office below)

OATH OF ADMINISTRATOR

I swear affirm that I believe that the above named decedent died without leaving any Last Will and Testament; that I will well and truly administer all and singular the goods and chattels, rights and credits of the deceased and a true and perfect inventory thereof return according to law; and that all other duties appertaining to the charge reposed in me, I will well and truly perform, according to law and with my best skill and ability;

so help me, God. and this is my solemn affirmation.

OATH OF EXECUTOR

I swear affirm that I believe this paper writing to be and contain the Last Will and Testament of the above named decedent; and that I will well and truly execute the same by first paying the decedent's debts and then the decedent's legacies; as far as the said estate shall extend or the law shall charge me; and that I will well and faithfully execute the office of an executor, agreeably to the trust and confidence reposed in me, and according to law;

so help me, God. and this is my solemn affirmation.

OATH OF ADMINISTRATOR CTA

I swear affirm that I believe this paper writing to be and contain the Last Will and Testament of the above named decedent; and that I will well and truly execute the same by first paying the decedent's debts and then the decedent's legacies, as far as the said estate shall extend or the law shall charge me; and that I will well and faithfully execute the office of an administrator cta to the best of my skill and ability and according to the law;

so help me, God. and this is my solemn affirmation.

OATH OF FIDUCIARY

I swear affirm that I will faithfully and honestly discharge the duties reposed in me according to the best of my skill and ability, and according to law;

so help me, God. and this is my solemn affirmation.

Name Of Fiduciary 1

Catherine Elizabeth Edwards

Name Of Fiduciary 2

Signature Of Fiduciary

Catherine Edwards

Signature Of Fiduciary

SWORN AFFIRMED AND SUBSCRIBED TO BEFORE ME

SWORN AFFIRMED AND SUBSCRIBED TO BEFORE ME

Date

12-22-2010

Date

Signature Of Person Authorized To Administer Oaths

Jeanette Sellers

Signature Of Person Authorized To Administer Oaths

Deputy CSC Assistant CSC Clerk Of Superior Court

Deputy CSC Assistant CSC Clerk Of Superior Court

Notary

Date My Commission Expires

Date My Commission Expires

Notary

SEAL

County Where Notarized

County Where Notarized

SEAL

STATE OF NORTH CAROLINA

File No.

10 E 589

Orange County

FILED

In The General Court Of Justice
Superior Court Division
Before The Clerk

IN THE MATTER OF THE ESTATE OF:

2010 DEC 22 P 3:03

Name Of Decedent/Incompetent

Elizabeth Anania Edwards

ORANGE COUNTY, N.C.
BY *[Signature]*

APPOINTMENT OF
RESIDENT PROCESS AGENT

G.S. 28A-4-2(4); 35A-1213(b)

I, the qualified personal representative or guardian of the above named estate, appoint the resident process agent named below on whom may be served citations, notices and processes in all actions or proceedings with respect to this estate.

Name, Street Address, PO Box, City, State And Zip Code Of Resident Process Agent

Maria M. Lynch
Lynch & Eastman, L.L.P
P.O. Box 30515
Raleigh, NC 27622-0515

Date

December 24, 2010

Name Of Personal Representative Or Guardian (Type Or Print)

Catherine Elizabeth Edwards

Telephone

919-571-3332

County Of Residence

Wake

Signature Of Personal Representative Or Guardian

[Signature]

ACCEPTANCE OF APPOINTMENT

I accept this appointment as resident process agent for the above named personal representative or guardian, and agree to notify the personal representative or guardian of all citations, notices and processes served on me as his resident process agent.

SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME

Date

December 20, 2010

Date

12/20/2010

Name Of Resident Process Agent (Type Or Print)

MARIA M. LYNCH

Signature Of Person Authorized To Administer Oaths

[Signature]

Signature Of Resident Process Agent

[Signature]

Deputy CSC Assistant CSC Clerk Of Superior Court

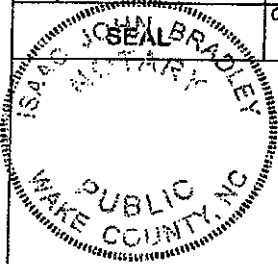
Notary

Date My Commission Expires

8/9/2014

County Where Notarized

Wake



STATE OF NORTH CAROLINA

File No. 10 E 589

ORANGE County

FILED

In The General Court Of Justice
Superior Court Division
Before The Clerk

IN THE MATTER OF THE ESTATE OF: 2010 DEC 22 P 3 03

Name Of Decedent
ELIZABETH ANANIA EDWARDS

ORANGE COUNTY C.S.
BY

CERTIFICATE OF PROBATE

Date Of Purported Will
12-01-2010

Date(s) Of Codicil(s)

G.S. 31-17

A paper-writing dated as indicated above, purporting to be the Last Will and Testament or codicil(s) thereto of the above named decedent has been exhibited before me. Sufficient proof of the due execution thereof has been taken in the self-proving paper-writing or as set forth in the accompanying affidavits which are incorporated and made a part hereof.

It is adjudged that the paper-writing and every part thereof is the Last Will and Testament or codicil(s) thereto of the decedent, and the same is ordered admitted to probate.

Date 12-22-2010
Signature [Handwritten Signature]
 Assistant CSC Clerk Of Superior Court

STATE OF NORTH CAROLINA

File No.

10 E 589

ORANGE County

In The General Court Of Justice
Superior Court Division
Before The Clerk

FILED

IN THE MATTER OF THE ESTATE OF:

Name Of Decedent/Minor/Incompetent/Trust

2010 DEC 22 P 3:03

ELIZABETH ANANIA EDWARDS

ORANGE COUNTY

BY

ORDER AUTHORIZING
ISSUANCE OF LETTERS

G.S. 28A-6-1; 35A-1215, -1226; 36A-107

The Court finds from the Application for Letters in the matter named above that the Fiduciary is entitled and is not disqualified to administer the estate, trust or guardianship.

Based on these findings the Court orders that Letters be issued to the Fiduciary in this matter.

Name And Address Of Fiduciary 1 CATHERINE ELIZABETH EDWARDS 3012 O NW WASHINGTON DC 20007	Date 12-22-2010
	Clerk Of Superior Court JAMES C. STANFORD
Title Of Fiduciary 1 EXECUTRIX	EX OFFICIO JUDGE OF PROBATE
Name And Address Of Fiduciary 2	Date Of Issuance 12-22-2010
	Signature <i>Faye Rhode</i>
Title Of Fiduciary 2	<input checked="" type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court

STATE OF NORTH CAROLINA

File No.

2010 E 000589

ORANGE County

In The General Court Of Justice
Superior Court Division
Before The Clerk

IN THE MATTER OF THE ESTATE OF:

FILED

Name Of Decedent

ELIZABETH ANANIA EDWARDS

2010 DEC 22 P 4:41


Name And Address Of Beneficiary

CATHERINE ELIZABETH EDWARDS
3012 O STREET NW

ORANGE COUNTY, C.S.C.

NOTICE TO
BENEFICIARY

WASHINGTON DC 20007

BY 

G.S. 31-14

TAKE NOTICE that the Last Will and Testament of the deceased named above, of which you are a beneficiary, was admitted to probate in this office. The name, address, title and telephone number of the fiduciary who qualified is set out below.

Name, Address And Title Of Fiduciary1

CATHERINE ELIZABETH EDWARDS, EXECUTOR
3012 O NW
WASHINGTON NC 20007

Name, Address And Title Of Fiduciary2

Telephone No.

(919)345-3432

Telephone No.

Date

12/22/2010

Signature

JEANETTE S SELLARS

Deputy CSC

Assistant CSC

Clerk Of Superior Court

STATE OF NORTH CAROLINA

File No.

2010 E 000589

ORANGE County

FILED

In The General Court Of Justice
Superior Court Division
Before The Clerk

IN THE MATTER OF THE ESTATE OF:

Name Of Decedent

ELIZABETH ANANIA EDWARDS

2010 DEC 22 P 4:41

Name And Address Of Beneficiary

EMMA CLAIRE EDWARDS
1201 OLD GREENSBORO

ORANGE COUNTY, C.S. NOTICE TO
BY JZ BENEFICIARY

CHAPEL HILL NC 27516

G.S. 31-14

TAKE NOTICE that the Last Will and Testament of the deceased named above, of which you are a beneficiary, was admitted to probate in this office. The name, address, title and telephone number of the fiduciary who qualified is set out below.

Name, Address And Title Of Fiduciary1

CATHERINE ELIZABETH EDWARDS, EXECUTOR
3012 O NW

Name, Address And Title Of Fiduciary2

WASHINGTON NC 20007

Telephone No.

(919)345-3432

Telephone No.

Date

12/22/2010

Signature

JEANETTE S SELLARS

Deputy CSC Assistant CSC Clerk Of Superior Court

STATE OF NORTH CAROLINA

File No.

2010 E 000589

ORANGE County

FILED

In The General Court Of Justice
Superior Court Division
Before The Clerk

IN THE MATTER OF THE ESTATE OF:

Name Of Decedent

ELIZABETH ANANIA EDWARDS

2010 DEC 22 P 4:41

Name And Address Of Beneficiary

JOHN ATTICUS EDWARDS
1201 GREENSBORO

ORANGE COUNTY, S.C.

BY

[Signature]

NOTICE TO
BENEFICIARY

CHAPEL HILL NC 27516

G.S. 31-14

TAKE NOTICE that the Last Will and Testament of the deceased named above, of which you are a beneficiary, was admitted to probate in this office. The name, address, title and telephone number of the fiduciary who qualified is set out below.

Name, Address And Title Of Fiduciary1

CATHERINE ELIZABETH EDWARDS, EXECUTOR
3012 O NW

WASHINGTON NC 20007

Telephone No.

(919)345-3432

Name, Address And Title Of Fiduciary2

Telephone No.

Date

12/22/2010

Signature

JEANETTE S SELLARS

Deputy CSC

Assistant CSC

Clerk Of Superior Court

STATE OF NORTH CAROLINA

File No.

2010 E 000589

ORANGE County

In The General Court Of Justice
Superior Court Division
Before The Clerk

FILED

IN THE MATTER OF THE ESTATE OF:

Name Of Decedent

ELIZABETH ANANIA EDWARDS

2010 DEC 22 P 4:41

Name And Address Of Beneficiary

EDWARDS ELIZABETH
3012 O STREET NW

ORANGE COUNTY, C.S.C.

NOTICE TO
BENEFICIARY

BY

WASHINGTON

DC 20007

G.S. 31-14

TAKE NOTICE that the Last Will and Testament of the deceased named above, of which you are a beneficiary, was admitted to probate in this office. The name, address, title and telephone number of the fiduciary who qualified is set out below.

Name, Address And Title Of Fiduciary1

CATHERINE ELIZABETH EDWARDS, EXECUTOR
3012 O NW

Name, Address And Title Of Fiduciary2

WASHINGTON

NC 20007

Telephone No.

(919)345-3432

Telephone No.

Date

12/22/2010

Signature

JEANETTE S SELLARS



Deputy CSC



Assistant CSC



Clerk Of Superior Court

CERTIFICATION OF VITAL RECORD

STATE OF NORTH CAROLINA
ORANGE COUNTY
OFFICE OF REGISTER OF DEEDS

NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
N. C. VITAL RECORDS
CERTIFICATE OF DEATH

20101209200116440 DEATH
Bk: D71 Pg: 6467
12/09/2010 10:56:05 AM 1/1

Registration District No. 06820 Local No.

DECEDENT'S NAME (First, Middle, Last) Elizabeth Anania Edwards SEX F DATE OF DEATH (Month, Day, Year) 12/07/2010

SOCIAL SECURITY NUMBER 555-74-950 AGE-Last Birthday 61 UNDER 1 YEAR Months Days OVER 1 YEAR Hours Minutes DATE OF BIRTH (Month, Day, Year) July 3, 1949 BIRTHPLACE (County and State or Foreign Country) Duval County, FL

WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes or No) No PLACE OF DEATH (Check only one) No

FACILITY NAME (If not for tuition, give street and number) 1201 Old Greensboro Rd CITY, TOWN, OR LOCATION OF DEATH Chapel Hill INSIDE CITY LIMITS? No COUNTY OF DEATH Orange

MARITAL STATUS-Married, Never Married, Widowed, Divorced (Specify) Married SURVIVING SPOUSE (If wife, give maiden name) John B. Edwards DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired) Attorney KIND OF BUSINESS/INDUSTRY Legal

RESIDENCE-STATE NC COUNTY Orange CITY, TOWN, OR LOCATION Chapel Hill STREET AND NUMBER 1201 Old Greensboro Rd

INSIDE CITY LIMITS? No ZIP CODE 27516 Was Decedent of Hispanic Origin? (Specify Yes or No) No RACE-American Indian, Black, White, Etc. (Specify) White DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (9-12) College (13-17+) 19+

FATHER'S NAME (First, Middle, Last) Vincent Anania MOTHER'S NAME (First, Middle, Maiden Surname) Elizabeth Thweatt

INFORMANT NAME (Type/Print) John R. Edwards MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code) 1201 Old Greensboro Rd, Chapel Hill, NC 27516-5224 DATE AMENDED

Part I. Enter the disease, injury, or complications that caused the death. Do not enter the mode of death, such as cardiac or respiratory arrest, shock or head injury. Where appropriate, enter tobacco, alcohol, or drug use. List only one cause on each line. (PRINT or TYPE)

IMMEDIATE CAUSE (Final disease or condition resulting in death) metastatic breast cancer DUE TO (OR AS A CONSEQUENCE OF) breast cancer 3.8 years
Secondary fat cell death (Yes, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST. breast cancer 6 years

Part II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I, such as tobacco, alcohol, or drug use; diabetes, etc.

20. AUTOPSY? (Yes or No) No Were findings considered in determining cause of death? No Was case referred to Medical Examiner? (Yes or No) No TIME OF DEATH

NOTICE: STATE LAW REQUIRES THAT ALL DEATHS DUE TO TRAUMA, ACCIDENT, HOMICIDE, SUICIDE, OR UNDER SUSPICIOUS, UNUSUAL OR UNNATURAL CIRCUMSTANCES BE REPORTED TO AND CERTIFIED BY A MEDICAL EXAMINER OR A MEDICAL EXAMINER'S CERTIFICATE OF DEATH. ANY DEATH FALLING INTO THESE CATEGORIES IS WITHIN THE MEDICAL EXAMINER'S JURISDICTION REGARDLESS OF THE LENGTH OF SURVIVAL FOLLOWING THE UNDERLYING INJURY.

CERTIFIER NAME AND TITLE OF CERTIFIER G. Claude Dees, MD Associate Professor of Medicine DATE SIGNED (Month, Day, Year) December 8, 2010

NAME AND ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (ITEM 20) (Type or Print) E. Claude Dees, MD UNC CB7305 Manning Drive Chapel Hill NC 27599

DISPOSITION METHOD OF DISPOSITION Burial, Cremation, Removal, Donation, Other Burial PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) Historic Oakwood Cemetery LOCATION - City or Town, State, Zip Code Raleigh, NC 27601-1161

NAME AND ADDRESS OF FUNERAL HOME Brown, Wynne Funeral Home NAME OF FUNERAL DIRECTOR Joel E. Branch LICENSE NUMBER FS-2358

300 Saint Mary's Street Raleigh, NC 27605 REGISTER'S SIGNATURE DATE FILED (Month, Day, Year) Dec 9, 2010 NAME OF EMBALMER William E. Babb, Jr. LICENSE NUMBER FS-1125

DEC 20101209200116440

PARENTS

INFORMANT

CAUSE OF DEATH

CERTIFIER

DISPOSITION

Subst. Code for DHR 1071 (Revised 6/05) Revisy 1/05 VITAL RECORDS

This is to certify that this is a true and correct reproduction or abstract of the official record filed in this office.

068-188621

Deborah B. Brooks
Register of Deeds
Orange County

Witness my hand and official seal
this the 9th day of December 20 10

By: Stephanie N. Glaze
Deputy/Assistant Register of Deeds

DHR 3914 (REVISED 3/19) NC VITAL RECORDS

Any alteration or erasure voids this certificate. Do not accept unless on security paper with Register of Deeds seal clearly embossed in left corner.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

STATE OF NORTH CAROLINA

File No.

10-E-589

ORANGE County

In The General Court Of Justice
Superior Court Division
Before the Clerk

IN THE MATTER OF THE ESTATE OF:

Name

ELIZABETH ANANIA EDWARDS

LETTERS

TESTAMENTARY

G.S. 28A-6-1; 28A-6-3; 28A-11-1; 36C-2-209

The Court in the exercise of its jurisdiction of the probate of wills and the administration of estates, and upon application of the fiduciary, has adjudged legally sufficient the qualification of the fiduciary named below and orders that Letters be issued in the above estate.

The fiduciary is fully authorized by the laws of North Carolina to receive and administer all of the assets belonging to the estate, and these Letters are issued to attest to that authority and to certify that it is now in full force and effect.

Witness my hand and the Seal of the Superior Court.

Name And Address Of Fiduciary 1 CATHARINE ELIZABETH EDWARDS 3012 O ST. NW WASHINGTON, DC 20007	Date Of Qualification 12/22/2010
	Clerk Of Superior Court JAMES C. STANFORD
Title Of Fiduciary 1 EXECUTRIX	EX OFFICIO JUDGE OF PROBATE
Name And Address Of Fiduciary 2	Date Of Issuance 12/22/2010
	Signature
Title Of Fiduciary 2	<input checked="" type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court

SEAL

NOTE: This letter is not valid without the official seal of the Clerk of Superior Court.