16-145

Tax Collector's Certification

CTY-513

Tax Deed Application Number
1600056

Date of Tax Deed Application
Apr 15, 2016

This is to certify that **U.S. BANK AS CUST FOR MAGNOLIA**, holder of **Tax Sale Certificate Number 2014 / 3032**, Issued the 1st Day of June, 2014 and which encumbers the following described property in the county of Escambia, State of Florida, to wit: **06-1302-000**

Cert Holder:
U.S. BANK AS CUST FOR MAGNOLIA
P.O. BOX 645290
CINCINNATI, OH 45264

Property Owner:
MELTON WILLIAM C LIFE EST &
DUKES MARY M TRUSTEE &
1200 W TEN MILE RD
CANTONMENT, FL 32533
LT 1 AND W1/2 OF LT 2 BLK 28 HAZLEHURST PLAT DB 55 P 262
SEC 17/31 T 2S R 30 OR 3608 P 640 CA 136

has surrendered same in my office and made written application for tax deed in accordance with Florida Statutes. I certify that the following tax certificates, interest, ownership and encumbrance report fee, and Tax Collector's fees have been paid, or if the certificate is held by the County, all appropriate fees have been deposited.

Certificates owned by applicant and filed in connection with this application:

Certificate Year/Number	Account Number	Sale Date	Face Amount of Certificate	Interest	Total
2014/3032	06-1302-000	06-01-2014	767.41	38.37	805.78

Certificates redeemed by applicant or included (County) in connection with this tax deed application:

Certificate Year/Number	Account Number	Sale Date	Face Amount of Certificate	Tax Collector's Fee	Interest	Total
2015/3256	06-1302-000	06-01-2015	808.42	6.25	40.42	855.09
2013/3395	06-1302-000	06-01-2013	776.13	6.25	38.81	821.19

Amounts Certified by Tax Collector (Lines 1-7):	**Total Amount Paid**
1. Total of all Certificates in Applicant's Possession and Cost of the Certificates Redeemed by Applicant	2,482.06
2. Total of Delinquent Taxes Paid by Tax Deed Applicant	0.00
3. Total of Current Taxes Paid by Tax Deed Applicant	787.90
4. Ownership and Encumbrance Report Fee	200.00
5. Tax Deed Application Fee	175.00
6. Total Interest Accrued by Tax Collector Pursuant to Section 197.542, F.S.	
7. Total (Lines 1 - 6)	3,644.96
Amounts Certified by Clerk of Court (Lines 8-15):	**Total Amount Paid**
8. Clerk of Court Statutory Fee for Processing Tax Deed	
9. Clerk of Court Certified Mail Charge	
10. Clerk of Court Advertising Charge	
11. Clerk of Court Recording Fee for Certificate of Notice	
12. Sheriff's Fee	
13. Interest Computed by Clerk of Court Pursuant to Section 197.542, F.S.	
14. Total (Lines 8 - 13)	
15. One-half Assessed Value of Homestead Property, if Applicable per F.S.	
16. Other Outstanding Certificates and Delinquent Taxes Not Included in this Application,	
17. Statutory (Opening) Bid; Total of Lines 7, 14, 15 (if applicable) and 16 (if	
18. Redemption Fee	6.25
19. Total Amount to Redeem	

Done this the 27th day of April, 2016 Janet Holley, Tax Collector of Escambia County

Date of Sale: August 1, 2016 By **Jonathan Johnson**

*This certification must be surrendered to the Clerk of the Circuit Court no later than ten (10) days after this date.
06-1302-000 2014

FORM 512 NOTICE TO TAX COLLECTOR OF APPLICATION FOR TAX DEED

Application Number 1600056

TO: Tax Collector of ESCAMBIA COUNTY: JANET HOLLEY

In accordance with the Florida Statutes, I,

U.S. BANK AS CUST FOR MAGNOLIA
P.O. BOX 645290
CINCINNATI, OH 45264

, holder of the following tax sale certificate hereby surrender same to the Tax Collector and make tax deed application thereon:

Certificate No.	Date	Legal Description
2014/ 3032	06-01-2014	LT 1 AND W1/2 OF LT 2 BLK 28 HAZLEHURST PLAT DB 55 P 262 SEC 17/31 T 2S R 30 OR 3608 P 640 CA 136

I agree to pay all delinquent taxes, redeem all outstanding tax certificates not in my possession, pay any omitted taxes, and pay current taxes, if due, covering the land, and pay any interest earned (a) on tax certificates not in my possession, (b) on omitted taxes or (c) on delinquent taxes. I also agree to pay all tax collector's fees, ownership and encumbrance report costs, clerk of the court costs, charges and fees and sheriff's costs, if applicable. Attached is the above- mentioned tax sale certificate on which this application is based and all other certificates of the same legal description which are in my possession.

Electronic signature on file
Applicant's Signature

04-15-2016
Date

PAM CHILDERS
CLERK OF THE CIRCUIT COURT
ARCHIVES AND RECORDS
CHILDSUPPORT
CIRCUIT CIVIL
CIRCUIT CRIMINAL
COUNTY CIVIL
COUNTY CRIMINAL
DOMESTIC RELATIONS
FAMILY LAW
JURY ASSEMBLY
JUVENILE
MENTAL HEALTH
MIS
OPERATIONAL SERVICES
PROBATE
TRAFFIC

COUNTY OF ESCAMBIA
OFFICE OF THE
CLERK OF THE CIRCUIT COURT

BRANCH OFFICES
ARCHIVES AND RECORDS
JUVENILE DIVISION
CENTURY

CLERK TO THE BOARD OF
COUNTY COMMISSIONERS
OFFICIAL RECORDS
COUNTY TREASURY
AUDITOR

PAM CHILDERS, CLERK OF THE CIRCUIT COURT
Tax Certificate Redeemed From Sale
Account: 061302000 Certificate Number: 003032 of 2014

Payor: JERRY MELTON 14000 STARBOARD DR SEMINOLE FL 33776 **Date** 05/09/2016

Clerk's Check #	5530096234	Clerk's Total	$477.00
Tax Collector Check #	1	Tax Collector's Total	$3,869.91
		Postage	$60.00
		Researcher Copies	$40.00
		Total Received	~~$4,446.91~~ $3,842.63

PAM CHILDERS
Clerk of the Circuit Court

Received By: _____
Deputy Clerk

PAM CHILDERS
CLERK OF THE CIRCUIT COURT
ARCHIVES AND RECORDS
CHILDSUPPORT
CIRCUIT CIVIL
CIRCUIT CRIMINAL
COUNTY CIVIL
COUNTY CRIMINAL
DOMESTIC RELATIONS
FAMILY LAW
JURY ASSEMBLY
JUVENILE
MENTAL HEALTH
MIS
OPERATIONAL SERVICES
PROBATE
TRAFFIC

COUNTY OF ESCAMBIA
OFFICE OF THE
CLERK OF THE CIRCUIT COURT

BRANCH OFFICES
ARCHIVES AND RECORDS
JUVENILE DIVISION
CENTURY

CLERK TO THE BOARD OF
COUNTY COMMISSIONERS
OFFICIAL RECORDS
COUNTY TREASURY
AUDITOR

Case # 2014 TD 003032
Redeemed Date 05/09/2016
Name JERRY MELTON 14000 STARBOARD DR SEMINOLE FL 33776

Clerk's Total = TAXDEED	$~~477~~.00
Due Tax Collector = TAXDEED	$3,869.91
Postage = ~~TD~~2	$60.00
ResearcherCopies = TD6	$40.00

$3,842.63

• For Office Use Only

Date	Docket	Desc	Amount Owed	Amount Due	Payee Name

FINANCIAL SUMMARY

No Information Available - See Dockets

Search Property | Property Sheet | Lien Holder's | Redeem | Forms | Courtview | Benchmark

Redeemed From Sale

PAM CHILDERS
CLERK OF THE CIRCUIT COURT
ESCAMBIA COUNTY, FLORIDA

Tax Deed - Redemption Calculator

Account: 061302000 Certificate Number: 003032 of 2014

Redemption: Yes | Application Date: 04/15/2016 | Interest Rate: 18%

	Final Redemption Payment ESTIMATED	Redemption Overpayment ACTUAL
	Auction Date 08/01/2016	Redemption Date 05/09/2016
Months	4	1
Tax Collector	$3,644.96	$3,644.96
Tax Collector Interest	$218.70	$54.67
Tax Collector Fee	$6.25	$6.25
Total Tax Collector	$3,869.91	~~$3,705.88~~ TC
Clerk Fee	$130.00	$130.00
Sheriff Fee	$120.00	$120.00
Legal Advertisement	$200.00	$200.00
App. Fee Interest	$27.00	$6.75
Total Clerk	$477.00	$456.75 CH
Postage	$60.00	$0.00
Researcher Copies	$40.00	$0.00
Total Redemption Amount	$4,446.91	~~$4,162.63~~ - 120 - 200 = $3842.63
	Repayment Overpayment Refund Amount	$284.28

Notes: ACTUAL SHERIFF $240.00
5/2/16 CALLED JERRY MELTON 727-542-6454, TOLD HIM IT WOULD $3842.63, IF PAID IN MAY, ALSO EMAILED IT TO

Submit | Reset | Print Preview

Pam Childers

Clerk of the Circuit Court and Comptroller, Escambia County

Clerk of Courts • County Comptroller • Clerk of the Board of County Commissioners • Recorder •

May 12, 2016

US BANK AS CUST FOR MAGNOLIA
PO BOX 645290
CINCINNATI OH 45264

Dear Certificate Holder:

The records of this office show that an application for a tax deed had been made on the property represented by the numbered certificate listed below. The property redeemed prior to sale; therefore your application fees are now refundable.

TAX CERT	APP FEES	INTEREST	TOTAL
2014 TD 001766	$450.00	$6.75	$456.75
2014 TD 003032	$450.00	$6.75	$456.75
		TOTAL	**$913.50**

Very truly yours,

PAM CHILDERS
Clerk of Circuit Court

By:
Emily Hogg
Tax Deed Division

Tax Deeds • 221 Palafox Place • Suite 110 • Pensacola, FL 32502
Telephone 850-595-3793 • OR@EscambiaClerk.com

16-145
Redeemed

Southern Guaranty Title Company

4400 Bayou Boulevard, Suite 13B
Pensacola, Florida 32503
Telephone: 850-478-8121
Facsimile: 850-476-1437

OWNERSHIP AND ENCUMBRANCE REPORT

File No.: 12674

May 10, 2016

Escambia County Tax Collector
P.O. Box 1312
Pensacola, Florida 32591

Pursuant to your request, the Company has caused a search to be made of the Public Records of Escambia County, Florida, solely as revealed by records maintained from 05-09-1996, through 05-09-2016, and said search reveals the following:

1. THE GRANTEE(S) OF THE LAST DEED(S) OF RECORD IS:

William C. Melton, life estate, (now deceased), Mary Marjorie Dukes, Trustee (deceased) for William C. Melton (deceased), Charles Leon Melton, Jerry Robert Melton and and Carol Melton Tanner

2. The land covered by this Report is:

LEGAL DESCRIPTION IS ATTACHED HERETO AND MADE A PART HEREOF

3. The following unsatisfied mortgages, liens and judgments affecting the land covered by this Report appear of record:

SEE CONTINUATION PAGE ATTACHED HERETO AND MADE A PART HEREOF

4. Taxes:

SEE CONTINUATION PAGE ATTACHED HERETO AND MADE A PART HEREOF

The foregoing report is prepared and furnished for information only, is not intended to constitute or imply any opinion, warranty, guaranty, insurance, or similar assurance as to the status of title, and no determination has been made of the authenticity of any instrument described or referred to herein. The name search for the purposes of determining applicable judgments and liens is limited to the apparent record owner(s) shown herein, No attempt has been made to determine whether the land is subject to liens or assessments which are not shown as existing liens by the public records. The Company's liability hereunder shall not exceed the cost of this Report, or $1,000.00 whichever is less.

THIS REPORT SHALL NOT BE USED FOR THE ISSUANCE OF TITLE INSURANCE.

Southern Guaranty Title Company

By: _____

May 10, 2016

OWNERSHIP AND ENCUMBRANCE REPORT
LEGAL DESCRIPTION

File No.: 12674 May 10, 2016

Lot 1 and West 1/2 of Lot 2, Block 28, Hazlehurst, as per plat thereof, recorded in Deed Book 262, Page 55, of the Public Records of Escambia County, Florida

OWNERSHIP AND ENCUMBRANCE REPORT
CONTINUATION PAGE

File No.: 12674 May 10, 2016

UNSATISFIED MORTGAGES, LIENS AND JUDGMENTS AFFECTING THE LAND COVERED BY THIS REPORT THAT APPEAR OF RECORD:

1. MSBU Lien filed by Escambia County recorded in O.R. Book 4448, page 254, and O.R. Book 4317, page 26.

2. Taxes for the year 2013-2015 delinquent. The assessed value is $44,894.00. Tax ID 06-1302-000.

PLEASE NOTE THE FOLLOWING:

A. Subject to current year taxes.
B. Taxes and assessments due now or in subsequent years.
C. Subject to Easements, Restrictions and Covenants of record.
D. Encroachments, overlaps, boundary line disputes, and any other matters which would be disclosed by an accurate survey and inspection of the premises.
E. Oil, gas and mineral or any other subsurface rights of any kind or nature.

SOUTHERN GUARANTY TITLE COMPANY

4400 BAYOU BLVD., SUITE 13-B, CORDOVA SQUARE
PENSACOLA, FLORIDA 32503
TEL. (850) 478-8121 FAX (850) 476-1437
Email: rcsgt@aol.com

Janet Holley
Escambia County Tax Collector
P.O. Box 1312
Pensacola, FL 32596

CERTIFICATION: TITLE SEARCH FOR TDA

TAX DEED SALE DATE: 8-1-2016

TAX ACCOUNT NO.: 06-1302-000

CERTIFICATE NO.: 2014-3032

In compliance with Section 197.256, Florida Statutes, the following is a list of names and addresses of those persons, firms and/or agencies having legal interest in or claim against the above described property. The above referenced tax sale certificate is being submitted as proper notification of tax deed sale.

YES	NO	
___	X	Notify City of Pensacola, P.O. Box 12910, 32521 221 Palafox Place, 4th Floor/
X	___	Notify Escambia County, 190 Governmental Center, 32502
___	X	Homestead for _____ tax year.

Charles Leon Melton
Jerry Robert Melton
Carol Melton Tanner
c/o David Stephens
1200 W. Ten Mile Rd.
Cantonment, FL 32533

Jerry Robert Melton
14000 Starboard Dr.
Seminole, FL 34646

Charles Leon Melton
111603 Maple St.
Bloomington, CA 92316

Carol Melton Tanner
402 S. Aurora Ave.
Clearwater, FL 33575

Unknown Tenants
2711 W. Avery St.
Pensacola, FL 32505

Certified and delivered to Escambia County Tax Collector, this 10th day of May, 2016.

SOUTHERN GUARANTY TITLE COMPANY

by: Richard S. Combs, President

NOTE: The above listed addresses are based upon current information available, but said addresses are not guaranteed to be true or correct.

Prepared by:
BARNE J. MORAIN
Attorney - at - law
113 N. Palafox St.
Pensacola, Florida

OR BK3608 Pg0640
INSTRUMENT 00141447

DEED OF CONVEYANCE

As the undersigned are the children and sole heirs of their father, FRED HARVIN MELTON, who died February 26, 1993, with his first wife and the mother of the undersigned, Cloria Bell Melton, having predeceased him on December 2nd, 1980, and, his second and surviving wife, not bearing him issue, Hazel S. Melton, having executed a Post Marital Agreement dated June 9th, 1983 waiving all rights of inheritance and said children, Mary Marjorie Dukes of 2965 Baronne St., Pensacola, Florida 32526, Charles Leon Melton of 111603 Maple St., Bloomington, California 92316, Jerry Robert Melton of 14000 Starboard Dr., Seminole, Florida 34646, William Clenon Melton of 2711 W. Avery St., Pensacola, Florida 32505 and Carol Melton Tanner of 402 S. Aurora Ave., Clearwater, Florida 33575, desire to settle among themselves the inheritance from their father by conveying and transferring the assets and real estates of said decendant and HEREBY CONVEY said properties as follows:

A. To Mary Marjorie Dukes, as Trustee for William Clenon Melton for his lifetime, then to his surviving brother and sisters unless sold by Trustee for the benefit of William Clenon Melton which she is hereby authorized to do and use the proceeds as she deems best as continuing Trustee, said property located in Escambia County, Florida, being

> Lot numbered One (1) and the West Half (W ½) of Lot numbered Two (2) in Block numbered Twenty-eight (28) in the subdivision known as Hazlehurst, in a portion of Section 31, Township 2 South, Range 30 West in Escambia County, Florida, as shown on plat of said subdivision appearing of record at Page 262 of Deed Book 55 of the records of said County.

B. To Mary Marjorie Dukes, Charles Leon Melton, Jerry Robert Melton and Carol Melton Tanner, equally said property located in Escambia County, Florida, being

> Lot fifteen, (15), Block C, Laurel Park, a subdivision of a portion of Section 16, Township 2 South, Range 30 West, Escambia County, Florida according to plat thereof, recorded in Plat Book 4, at Page 15, of the Public Records of Escambia County, Florida.

C. To Mary Marjorie Dukes as Trustee for William Clenon Melton for his lifetime, then to his surviving brother and sisters unless sold by Trustee for the benefit of William Clenon Melton which she is hereby authorized to do and use the proceeds as she deems best as continuing Trustee, said property located in Monroe County, Alabama, being all rights of William Clenon Melton in any mineral rights and royalties and ownership interest in assets including real estate of property inherited from Hasseltine Hanks with the real estate part described as follows:

> The South half of the Southwest quarter, Section Thirteen (13), Township Five (5) North, Range Six (6) East. Also the following described tract or parcel of land: Commencing at the Southeast corner of the North half of Southwest quarter of Section Thirteen (13), Township Five (5) North, Range Six (6) East, and running 520 yards West, thence 193 yards North, thence 520 yards East, thence 193 yards South to the place of beginning. There is excepted herefrom the right-of-way of the railroad running across said lands

together with all and singular the tenements, hereditaments and appurtenances thereto belonging or in any wise appertaining, free from all exemptions and right of homestead.

D.S. PD. $ .70
DATE 1-7-94
JOE A. FLOWERS, COMPTROLLER
BY: J. Knighten D.C.
CERT. REG. #59-2003328-27-01

AS WITNESSES TO:

Marcia L. Dukes

Howard W Denham

Mary Marjorie Dukes
MARY MARJORIE DUKES

State of Florida
County of ESCAMBIA

BEFORE ME, personally appeared MARY MARJORIE DUKES and signed and acknowledged signing the foregoing instrument, who did/did not take an oath this the 26th day of April, 1994. That the individual was personally known to me, ~~or provided the following identification:~~ _____.

Ilene D. Cook
Notary Public
ILENE D. COOK
Commission #: CC045145
Commission Expires: 9-9-94

ILENE D. COOK NOTARY PUBLIC STATE OF FLORIDA My Comm. Expires Sept. 9, 1994 No. CC 045145

AS WITNESSES TO:

Jerry Robert Melton

Carol Melton Tanner
CAROL MELTON TANNER

CANDACE S. HIDER MY COMMISSION # CC 176324 EXPIRES: January 27, 1996 Bonded Thru Notary Public Underwriters

State of Florida
County of Pinellas

BEFORE ME, personally appeared CAROL MELTON TANNER, and signed and acknowledged signing the foregoing instrument, who did/did not take an oath this the 5 day of March, 1994. That the individual was personally known to me or provided the following identification: Florida Drivers License T560 113 44970 Exp 12/30/96

Candace S. Hider
Notary Public
CANDACE S. HIDER

AS WITNESSES TO:

Carol Melton Tanner

Jerry Robert Melton
JERRY ROBERT MELTON

State of Florida
County of Pinellas

BEFORE ME, personally appeared JERRY ROBERT MELTON, and signed and acknowledged signing the foregoing instrument, who did/did not take an oath this the 5 day of March, 1994. That the individual was personally known to me or provided the following identification: Florida Drivers Licens M435 436 39 289 Exp 8/14/93

Candace S. Hider
Notary Public
CANDACE S. HIDER

CANDACE S. HIDER MY COMMISSION # CC 176324 EXPIRES: January 27, 1996 Bonded Thru Notary Public Underwriters

AS WITNESSES TO:

Theresa A Judge

CHARLES LEON MELTON

4-1-94

OR Bk3608 Pg0642
INSTRUMENT 00141447

State of _____
County of _____

BEFORE ME, personally appeared CHARLES LEON MELTON, and signed and acknowledged signing the foregoing instrument, who did/did not take an oath this the _____ day of _____, 1994. That the individual was personally known to me or provided the following identification: _____

_____
Notary Public

AS WITNESSES TO:

Mary Marjorie Dukes

Howard W Denham

WILLIAM CLENON MELTON

Instrument 00141447
Filed and recorded in the public records
JULY 7, 1994
at 09:06 A.M.
in Book and Page noted

above or hereon and record verified
JOE A. FLOWERS, COMPTROLLER
Escambia County, Florida

State of Florida
County of ESCAMBIA

BEFORE ME, personally appeared WILLIAM CLENON MELTON, and signed and acknowledged signing the foregoing instrument, who did/did not take an oath this the 26th day of April, 1994. That the individual was personally known to me, ~~or provided the following identification:~~ _____

Ilene D. Cook
Notary Public
Ilene D. Cook
Commission #: CC045145
Commission Expires: 9-9-94

ILENE D. COOK NOTARY PUBLIC STATE OF FLORIDA
My Comm. Expires Sept. 9, 1994
No. CC 045145

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

No. 5193

State of CALIFORNIA
County of San Bernardino

On 04/01/94 (DATE) before me, Theresa A. Judge, Notary Public (NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC")

personally appeared **Charles Leon Melton** (NAME(S) OF SIGNER(S))

☒ personally known to me - OR - ☒ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

THERESA A. JUDGE
COMM. # 1012047
Notary Public — California
SAN BERNARDINO COUNTY
My Comm. Expires DEC 23, 1997

Theresa A Judge
SIGNATURE OF NOTARY

OPTIONAL SECTION

CAPACITY CLAIMED BY SIGNER

Though statute does not require the Notary to fill in the data below, doing so may prove invaluable to persons relying on the document.

☒ INDIVIDUAL
☐ CORPORATE OFFICER(S)
_____ TITLE(S)
☐ PARTNER(S) ☐ LIMITED ☐ GENERAL
☐ ATTORNEY-IN-FACT
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER: _____

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)
Charles Leon Melton

OPTIONAL SECTION

THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT RIGHT:

Though the data requested here is not required by law, it could prevent fraudulent reattachment of this form.

TITLE OR TYPE OF DOCUMENT Deed of Conveyance

NUMBER OF PAGES -3- DATE OF DOCUMENT 04/01/94

SIGNER(S) OTHER THAN NAMED ABOVE Mary Marjorie Dukes, Carol Melton Tanner, Jerry Robert Melton, and William Clenon Melton

Recorded in Public Records 10/26/2011 at 08:43 AM OR Book 6778 Page 1422, Instrument #2011075262, Ernie Lee Magaha Clerk of the Circuit Court Escambia County, FL Recording $10.00

STATE OF FLORIDA

OFFICE of VITAL STATISTICS

CERTIFIED COPY

LOCAL FILE NO. 1095

FLORIDA CERTIFICATE OF DEATH

2010 051750

1. DECEDENT'S NAME (First, Middle, Last, Suffix): Mary Marjorie Dukes					2. SEX: Female
3. DATE OF BIRTH (Month, Day, Year): December 6, 1932	4a. AGE-Last Birthday (Years): 77	4b. UNDER 1 YEAR: Months / Days	4c. UNDER 1 DAY: Hours / Minutes	5. DATE OF DEATH (Month, Day, Year): April 11, 2010	
6. SOCIAL SECURITY NUMBER: 264-42-0245	7. BIRTHPLACE (City and State or Foreign Country): Monroe County, Alabama			8. COUNTY OF DEATH: Escambia	
9. PLACE OF DEATH (Check only one): HOSPITAL: X Inpatient; Emergency Room/Outpatient; Dead on Arrival. NON-HOSPITAL: Hospice facility; Nursing Home/Long Term Care Facility; Decedent's Home; Other (Specify)					
10. FACILITY NAME (If not institution, give street address): Baptist Hospital			11a. CITY, TOWN, OR LOCATION OF DEATH: Pensacola		11b. INSIDE CITY LIMITS? X Yes No
12. MARITAL STATUS (Specify): Married; Married, but Separated; X Widowed; Divorced; Never Married			13. SURVIVING SPOUSE'S NAME (If wife, give maiden name)		
14a. RESIDENCE - STATE: Florida	14b. COUNTY: Escambia		14c. CITY, TOWN, OR LOCATION: Pensacola		
14d. STREET ADDRESS: 2965 Barone Street		14e. APT. NO.	14f. ZIP CODE: 32526		14g. INSIDE CITY LIMITS? Yes X No
15a. DECEDENT'S USUAL OCCUPATION (Indicate type of work done during most of working life.) Do not use "Retired": Realtor			15b. KIND OF BUSINESS/INDUSTRY: Real Estate		
16. DECEDENT'S RACE (Specify the responses to indicate what decedent considered himself/herself to be. More than one race may be specified.): X White; Black or African American; American Indian or Alaskan Native (Specify tribe); Asian Indian; Chinese; Filipino; Japanese; Korean; Vietnamese; Other Asian (Specify); Native Hawaiian; Guamanian or Chamorro; Samoan; Other Pacific Isl. (Specify); Other (Specify)					
17. DECEDENT OF HISPANIC OR HAITIAN ORIGIN (Specify if decedent was of Hispanic or Haitian Origin.): Yes (If Yes, specify); X No; Mexican; Puerto Rican; Cuban; Central/South American; Other Hispanic (Specify); Haitian					
18. DECEDENT'S EDUCATION (Specify the decedent's highest degree or level of school completed at time of death.): 8th or less; High school but no diploma; X High school diploma or GED; College but no degree; College degree (Specify): Associate; Bachelor's; Master's; Doctorate					19. WAS DECEDENT EVER IN U.S. ARMED FORCES? Yes X No
20. FATHER'S NAME (First, Middle, Last, Suffix): Fred Harvin Melton			21. MOTHER'S NAME (First, Middle, Maiden Surname): Cloria Bell Bodiford		
22a. INFORMANT'S NAME: Keith Edward Stephens			22b. RELATIONSHIP TO DECEDENT: Son	22c. INFORMANT'S MAILING - STATE: Texas	
22d. CITY OR TOWN: Waxahachie	22e. STREET ADDRESS: 717 Dogwood Lane				22f. ZIP CODE: 75165-
24. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): Pensacola Memorial Gardens		25a. LOCATION - STATE: Florida		25b. LOCATION - CITY OR TOWN: Pensacola	
26a. METHOD OF DISPOSITION: X Burial; Entombment; Cremation; Donation; Removal from State; Other (Specify)					
26b. IF CREMATION, DONATION OR BURIAL AT SEA, WAS MEDICAL EXAMINER APPROVAL GRANTED? Yes No	27a. LICENSE NUMBER (of Licensee): F044298		27b. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH: ▶ Evelyn Hall		
28a. NAME OF FUNERAL FACILITY: Pensacola Memorial Gardens and Funeral Home, Inc.				28a. FACILITY'S MAILING - STATE: Florida	
28b. CITY OR TOWN: Pensacola	28c. STREET ADDRESS: 7433 Pine Forest Road				28d. ZIP CODE: 32526-
29. CERTIFIER: X Certifying Physician - To the best of my knowledge, death occurred at the time, date and place, and due to the cause(s) and manner stated. (Check one) Medical Examiner - On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date and place, due to the cause(s) and manner stated.					
31a. (Signature and Title of Certifier): ▶ PHYSICIAN'S SIGNATURE	31b. DATE SIGNED (mm/dd/yyyy): 4/13/10	32. TIME OF DEATH (24 hr.): 1045	33. MEDICAL EXAMINER'S CASE NUMBER		
34a. LICENSE NUMBER (of Certifier): ME104240	34b. CERTIFIER'S NAME: Alexander Zimilevich, M.D.		35. NAME OF ATTENDING PHYSICIAN (If other than Certifier)		
36a. CERTIFIER'S - STATE: Florida	36b. CITY OR TOWN: Pensacola	36c. STREET ADDRESS: 1000 West Moreno Street			36d. ZIP CODE: 32501-
37. SUBREGISTRAR - Signature and Date: ▶	38a. LOCAL REGISTRAR - Signature: ▶ Marilyn Boutwell Deputy DR			38b. DATE FILED BY REGISTRAR (Mo., Day, Yr.): APR 15 2010	

C. Meade Baggett, State Registrar

Date Issued: **August 5, 2011**

REQ: 26314444+

VOID IF ALTERED OR ERASED

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DH FORM 1947 (08/04)

38131025

CERTIFICATION OF VITAL RECORD

FLORIDA DEPARTMENT OF HEALTH

38131025

STATE OF MISSISSIPPI

MISSISSIPPI STATE DEPARTMENT OF HEALTH
VITAL RECORDS

TYPE OR PRINT WITH BLACK INK

FILING DATE: MAR 0 2 2005

CERTIFICATE OF DEATH
STATE OF MISSISSIPPI

STATE FILE NUMBER: 123- 05-003881

DECEASED

1. NAME First	Middle	Last	2. SEX	3a. HOUR OF DEATH	3b. DATE OF DEATH (Month, Day, Year)
William	C.	Melton	MALE	02:25 A.m	FEBRUARY 25, 2005

4. RACE (Specify White, Black, American Indian, etc.)	5a. AGE AT LAST BIRTHDAY (Years)	ONLY IF UNDER 1 YEAR 5b. MOS	5c. DAYS	ONLY IF UNDER 1 DAY 5d. HOURS	5e. MINS.	6. DATE OF BIRTH (Month, Day, Year)	7a. COUNTY OF DEATH
white	62					July 12, 1942	HARRISON

7b. CITY OR TOWN OF DEATH	7c. HOSPITAL OR OTHER INSTITUTION-NAME AND NUMBER (If not in either, give street address, route number or other location)	7d. IF IN HOSP., OR INST. SPECIFY INPT., OUTPT., EMER. RM. OR DOA	8. STATE OF BIRTH
GULFPORT	GARDEN PARK MEDICAL CENTER #24G	EMER. ROOM	Alabama

Death occurred in institution, see HANDBOOK, regarding completion of RESIDENCE items

9. DECEDENT'S EDUCATION (Specify only highest grade completed)	Elem/High School (0-12)	College (1-4, 5+)	10. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)	11. SURVIVING SPOUSE (If wife, give maiden name)	12. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes or No)
		3	never married		yes

13. ORIGIN OR DESCENT (Specify Cuban, Afro-American, Mexican, etc.)	14. SOCIAL SECURITY NUMBER	15a. USUAL OCCUPATION (Kind of work done most of working life)	15b. KIND OF BUSINESS OR INDUSTRY
American	266 62 2439	draftsman	construction

RESIDENCE items, or actual location rather than mailing address

16a. RESIDENCE—STATE	16b. COUNTY	16c. CITY OR TOWN	16d. INSIDE CITY LIMITS (Specify Yes or No)	16e. STREET AND NUMBER OR RURAL LOCATION
Mississippi	Harrison	Gulfport	no	2709 Angela Circle

PARENTS

17. FATHER—NAME First	Middle	Last	18. MOTHER—NAME First	Middle	Maiden
Fred	Harvin	Melton	Cloria	Bell	Bodiford

INFORMANT

19a. INFORMANT—NAME (Type or print)	19b. MAILING ADDRESS (Street and number or route and box number, City or town, State, ZIP code)
Mary M. Dukes	2965 Baronne St., Pensacola, FL 32526

DISPOSITION

20a. BURIAL, CREMATION, REMOVAL (Specify)	20b. CEMETERY, CREMATORY—NAME	20c. LOCATION (City and State)	21a. EMBALMER—SIGNATURE AND NUMBER
burial	Pensacola Mem. Gdns.	Pensacola, FL	FS ► Charles Ellers 1001

21b. FUNERAL HOME—NAME AND MISSISSIPPI I.D. NUMBER	21c. MAILING ADDRESS (Street and number or route and box number, City or town, State, ZIP code)
Riemann Funeral Home 24 R	P.O. Drawer 1750, Gulfport, MS 39502

PRONOUNCEMENT

22a. PERSON WHO PRONOUNCED DEATH—NAME AND TITLE (Type or print)	22b. PRONOUNCED DEAD (Month, Day, Year)	22c. PRONOUNCED DEAD (Hour)
DANIEL OVERBECK, M.D.	ON FEBRUARY 25, 2005	AT 02:25 A.m

CERTIFIER

23a. CERTIFIER—NAME (Type or print)	23b. MAILING ADDRESS (Street and number or route and box number, City or town, State, ZIP code)
GARY T. HARGROVE	P.O. BOX 4036, GULFPORT, MS 39502

Mississippi State Board of Health Form No. 511 Revised 1-1-89

This section to be completed by physician if NOT a medical examiner

24a. To the best of my knowledge, death occurred due to the cause(s) and manner as stated. SIGNATURE ► MD

24b. DATE SIGNED (Month, Day, Year)

24c. STATE LICENSE NUMBER

24d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or print)

This section to be completed by medical examiner ONLY

24e. On the basis of examination and/or investigation, in my opinion, death occurred due to the cause(s) and manner as stated. SIGNATURE ►

24f. TITLE: HARRISON COUNTY CORONER

24g. DATE SIGNED (Month, Day, Year): FEBRUARY 25, 2005

CAUSE OF DEATH

Conditions, if any, which gave rise to immediate cause stating the underlying cause last

25. PART I. DEATH CAUSED BY:		Interval between onset and death
	(a) IMMEDIATE CAUSE (Enter one cause only): CORONARY ARTERY DISEASE	
	(b) DUE TO, OR AS A CONSEQUENCE OF (Enter one cause only):	
	(c) DUE TO, OR AS A CONSEQUENCE OF (Enter one cause only):	

26. PART II: OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in PART I	27. AUTOPSY (Yes or No)	28. WAS CASE REFERRED TO MEDICAL EXAMINER? (Yes or No)
CONGESTIVE HEART FAILURE, HYPERTENSION	NO	YES

Was Decedent Pregnant Within 90 Days Prior to Death? ☐ Yes ☐ No

Use if death NOT due to natural causes

29a. ACCIDENT, SUICIDE, HOMICIDE, PENDING INVESTIGATION, OR UNDETERMINED (Specify)	29b. DATE OF INJURY (Month, Day, Year)	29c. HOUR OF INJURY	29d. DESCRIBE HOW OR BY WHAT MEANS INJURY OCCURRED
		m.	

29e. INJURY AT WORK (Yes or No)	29f. PLACE OF INJURY (Specify Home, Farm, Street, Factory, Office building, etc.)	29g. LOCATION Street or route number	City or town	State

THIS IS TO CERTIFY THAT THE ABOVE IS A TRUE AND CORRECT COPY OF THE CERTIFICATE ON FILE IN THIS OFFICE

Judy Moulder

MAR -2 2005

Judy Moulder
STATE REGISTRAR

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