

PAR ID	OWNER NAME			DATE	DEED BOOK	PAGE	
010431	HATSELL RUFUS GLEN			09-MAR-46	645	650	
MAP	PARCEL	HATSELL, BONNIE G LIFE ESTATE			9/28/2019	19E	814
1405-162							
ORTHO							
536410							
TOWNSHIP							
SWANSBORO							
SPLIT FROM							

PROPERTY ADDRESS	212 WALNUT ST
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ORIGINAL DEEDED ACREAGE	LOT	DATE	MB.	PG.	SUBDIVISON NAME	SECTION	PHASE	BLOCK	UNIT	LOT
ORIGINAL CALCULATED AC.	.41									
LESS & EXCEPT										
REMAINING AC.	LOT									

SPLITS, CONSOLIDATIONS, ACREAGE ADJUSTED		REFERENCE		ACREAGE	SPLITS, CONSOLIDATIONS, AC, ADJUSTED CONTINUED		REFERENCE		ACREAGE
	D.B.		SPLIT			D.B.		SPLIT	
	PG.		REMAINS			PG.		REMAINS	
	D.B.		SPLIT			D.B.		SPLIT	
	PG.		REMAINS			PG.		REMAINS	
	D.B.		SPLIT			D.B.		SPLIT	
	PG.		REMAINS			PG.		REMAINS	

REMARKS:
lasworld created

CERTIFICATION OF VITAL RECORD

STATE OF NORTH CAROLINA
WAYNE COUNTY
OFFICE OF REGISTER OF DEEDS

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

REGISTRATION DISTRICT NO. 096.60 LOGAL NO. COUNTY OF DEATH Wayne STATE FILE NO.

DECEASED'S LEGAL NAME: 1a. FIRST Rufus, 1b. MIDDLE Glen, 1c. LAST Hatsell, 1d. SUFFIX, 1e. LAST NAME PRIOR TO FIRST MARRIAGE.
2. SEX M, 3a. AGE LAST BIRTHDAY (Yrs) 74, 3b. UNDER 1 YEAR, 3c. UNDER 1 DAY, 4. DATE OF BIRTH (Month/Day/Year) May 14, 1945, 5. BIRTHPLACE (County/State or Foreign Country) Onslow, NC, 6. DATE OF DEATH (Month/Day/Year) September 28, 2019

7. PLACE OF DEATH (Check only one): 7a. DEATH OCCURRED IN A HOSPITAL, 7b. IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL, 7c. FACILITY NAME (if not institution, give street and number) 5410 U.S. Hwy 13 South, 7d. CITY OR TOWN Mount Olive, 7e. COUNTY OF DEATH Wayne, 8. MARITAL STATUS Married, 9. SURVIVING SPOUSE (Give name prior to first marriage) Bonnie Guthrie, 10a. DECEASED'S USUAL OCCUPATION Pipe Fitter, 10b. KIND OF BUSINESS/INDUSTRY U.S. Government, 11a. RESIDENCE-STATE OR FOREIGN COUNTRY NC, 11b. RESIDENCE-CITY OR TOWN Swansboro, 11c. COUNTY Onslow, 12a. STREET AND NUMBER 212 S. Walnut Street, 12b. INSIDE CITY LIMITS Yes, 12c. ZIP CODE 28584, 13. WAS DECEDENT EVER IN U.S. ARMED FORCES? No

14. DECEASED'S EDUCATION: High school graduate or GED completed, 15. DECEASED OF HISPANIC ORIGIN: No, not Spanish/Hispanic/Latino, 16. DECEASED'S RACE: White, 17. FATHER/PARENT NAME (First, Middle, Last) (Last Name Prior to First Marriage) Marvin Glen Hatsell, 18. MOTHER/PARENT NAME (First, Middle, Last) (Last Name Prior to First Marriage) Gladys Capps, 19a. INFORMANT'S NAME Bonnie Hatsell, 19b. RELATIONSHIP TO DECEDENT Wife, 19c. MAILING ADDRESS (Street and Number, City, State, Zip Code) 212 S. Walnut Street, Swansboro, NC 28584, 20a. METHOD OF DISPOSITION: Burial, 20b. PLACE OF DISPOSITION (Name of cemetery, crematory, other place) Capps Family Cemetery, 20c. LOCATION (City or town and State) Mount Olive, NC, 21a. SIGNATURE OF FUNERAL DIRECTOR, 21b. LICENSE NUMBER 1834, 21c. NAME OF EMBALMER Brian Taylor, 21d. LICENSE NUMBER 1834, 22. NAME AND ADDRESS OF FUNERAL HOME Seymour Funeral Home and Cremation Service, Inc., 1300 Wayne Memorial Drive, Goldsboro, NC 27534

23. PART I. Enter the chain of events (disease, injuries or complications) that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology on lines b, c and/or d. Enter only one cause on a line. DO NOT ABBREVIATE.
IMMEDIATE CAUSE: a. COLON CANCER, b. CONGESTIVE HEART FAILURE, c. CHRONIC OBSTRUCTIVE PULMONARY DISEASE, d. DIABETES MELLITUS, TYPE 2.
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.
24. WAS AN AUTOPSY PERFORMED? No, 25. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? No, 26. MANNER OF DEATH: Natural, 27. TIME OF DEATH (Approximate), 28. DID TOBACCO USE CONTRIBUTE TO DEATH? No, 29. IF FEMALE: Not pregnant, but pregnant 43 days to 1 year before death, 30. DATE PRONOUNCED (Month/Day/Year), 31a. DATE OF INJURY (Month/Day/Year), 31b. TIME OF INJURY, 31c. INJURY AT WORK? No, 31d. PLACE OF INJURY-at home, farm, street, factory, office, building, etc., 31e. IF TRANSPORTATION INJURY SPECIFY: Driver/Operator, 31f. DATE SIGNED (Month/Day/Year) 10-1-2019, 32. CERTIFIER (Check only one): Medical Examiner, 33a. SIGNATURE AND TITLE OF CERTIFIER: K. Carmack MD, 33b. LICENSE NUMBER: NC 30306, 33c. DATE REGISTERED BY STATE: 10-1-2019, 34. FOR LOCAL REGISTRAR (Name), 35. DATE: OCT 02 2019

36. DATE CORRECTED (Mo/Day/Yr), 37. DATE AMENDED (Mo/Day/Yr), 38. DATE CORRECTED, 39. DATE AMENDED

32. CERTIFIER (Check only one): Medical Examiner, 33a. SIGNATURE AND TITLE OF CERTIFIER: K. Carmack MD, 33b. LICENSE NUMBER: NC 30306, 33c. DATE REGISTERED BY STATE: 10-1-2019, 34. FOR LOCAL REGISTRAR (Name), 35. DATE: OCT 02 2019

36. DATE CORRECTED (Mo/Day/Yr), 37. DATE AMENDED (Mo/Day/Yr), 38. DATE CORRECTED, 39. DATE AMENDED

Volume 106 Page H

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

Judy Harrison
Register of Deeds
Wayne County

Witness my hand and official seal

this the 2 day of October, 2019

By: Lana B. Linker
Deputy/Assistant Register of Deeds



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

STATE OF NORTH CAROLINA

File No.

19 E 814

ONSLOW County

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

IN THE MATTER OF THE ESTATE OF:

Name Of Decedent

RUFUS G. HATSELL aka RUFUS GLEN HATSELL

CERTIFICATE OF PROBATE

Date Of Purported Will

04/18/2005

G.S. 28A-2A-6

Date(s) Of Codicil(s)

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

10/08/2019

Signature

Kimberly A. Biggs

Assistant CSC

Clerk Of Superior Court

STATE OF NORTH CAROLINA

File No.

19 E 814

ONSLOW County

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

IN THE MATTER OF THE ESTATE OF:

Name, Street Address, City, State, And Zip Code Of Decedent
RUFUS G. HATSELL aka RUFUS GLEN HATSELL
 212 S. WALNUT STREET
 SWANSBORO, NC 28584

APPLICATION FOR PROBATE
(WITHOUT QUALIFICATION OF A
PERSONAL REPRESENTATIVE)
 AND ADDENDUM (AOC-E-309)

Social Security No. (last four digits)

County Of Domicile At Time Of Death
ONSLOW

G.S. 28A-2A-1, -2, -5

Date Of Death
09/28/2019

Date Of Will And Codicil(s), If Any
4/18/2005

Place Of Death (If Different From County Of Domicile)
WAYNE COUNTY, NC

Name, Street Address, P.O. Box, City, State, And Zip Code Of Applicant
BONNIE G. HATSELL
 212 S. WALNUT STREET
 SWANSBORO, NC 28584

Name, Street Address, P.O. Box, City, State, And Zip Code Of Co-Applicant

Telephone No.
910-330-6111

Telephone No.

Legal Residence (County, State)
ONSLOW COUNTY, NC

Legal Residence (County, State)

Name, Street Address, P.O. Box, City, State, And Zip Code Of Attorney

Attorney Bar No.

Telephone No.

I, the undersigned, applying for probate of the decedent's last will and testament in the above estate, being first duly sworn, say that:

1. The decedent was domiciled in this county at the time of the decedent's death or left property or assets in this county.
2. a. I am the executor named in the will.
- b. I am a devisee named in the will, no executor has applied to have the will proved within sixty (60) days after the death of the testator, and the named executor(s) has/each have at least ten (10) days' notice of my intent to have the will proved.
- c. The decedent died on or after January 1, 2012, I am a devisee named in the will, less than sixty (60) days have passed since the death of the testator, no executor has yet applied to have the will proved, the named executor(s) has/each have at least ten (10) days' notice of my intent to have the will proved, and good cause exists to now probate the will in that _____
- d. I am a person interested in this estate, my interest is that _____, no executor has applied to have the will proved within sixty (60) days after the death of the testator, and the named executor(s) has/each have at least ten (10) days' notice of my intent to have the will proved.
- e. The decedent died on or after January 1, 2012, I am a person interested in this estate, my interest is that _____, less than sixty (60) days have passed since the death of the testator, no executor has yet applied to have the will proved, the named executor(s) has/each have at least ten (10) days' notice of my intent to have the will proved, and good cause exists to now probate the will in that _____
3. 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.)
4. 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
BONNIE G. HATSELL	73	SPOUSE	212 S. WALNUT ST, SWANSBORO, NC

Original - File Copy - Applicant
 (Preliminary Inventory On Reverse)

beneficiaries other than my Executor which are included in my taxable estate, or any other property included in my taxable estate which is not a part of the probate estate.

Life Estate

ARTICLE III

REAL ESTATE. I hereby devise and bequeath to my wife, Bonnie G. Hatsell, if she shall survive me, for her life, all the real estate I may own at the time of my death. Upon the death of my wife, I devise and bequeath all my real estate located in Wayne County, North Carolina, to my son, John Glen Hatsell, and all my real estate located in Onslow County, North Carolina, to my daughter, Jennifer H. Muston. If my son shall predecease me, I devise and bequeath all my real estate located in Wayne County, North Carolina, to his children, in shares of equal value. If my daughter shall predecease me, I devise and bequeath all my real estate located in Onslow County, North Carolina, to her children, in shares of equal value.

ARTICLE IV

RESIDUE. All the rest, residue, and remainder of my estate, both real and personal property, of whatsoever kind and wheresoever situated, I hereby devise and bequeath unto my spouse, Bonnie G. Hatsell, if living at my death. In the event my said spouse should predecease me, I devise and bequeath all the rest, residue and remainder of my estate in shares of equal value to my children, John Glen Hatsell and Jennifer H. Muston, and to the living issue, per stirpes, of any of my children who predecease me.

ARTICLE V

EXECUTOR. I hereby appoint my wife, Bonnie G. Hatsell, as Executor, to serve without bond, of this Will. If my wife shall predecease me or for any reason shall fail to

CERTIFICATE OF VITAL RECORD

**STATE OF NORTH CAROLINA
CARTERET COUNTY
OFFICE OF REGISTER OF DEEDS**

NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
STATE CENTER FOR HEALTH STATISTICS - N. C. VITAL RECORDS
CERTIFICATE OF DEATH

Registration District No. 016-10 Local No. _____

1. DECEDENT'S NAME (First, Middle, Last) Gladys Capps Hatsell		2. SEX Female	3. DATE OF DEATH (Month, Day, Year) June 2, 2002
4. SOCIAL SECURITY NUMBER [REDACTED]	5. AGE—Last Birthday (Years) 87	5b. UNDER 1 YEAR Months Days	5c. UNDER 1 DAY Hours Minutes
6. DATE OF BIRTH (Month, Day, Year) Mar. 7, 1915		7. BIRTHPLACE (County and State or Foreign Country) Wayne Co. NC	

DECEDENT

8. WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes or No) No		9a. PLACE OF DEATH (Check only one) <input checked="" type="checkbox"/> HOSPITAL <input type="checkbox"/> Inpatient <input type="checkbox"/> ER/Outpatient <input type="checkbox"/> DOA <input type="checkbox"/> OTHER: <input type="checkbox"/> Nursing Home <input type="checkbox"/> Residence <input type="checkbox"/> Other (Specify)	
9b. FACILITY NAME (If not institution, give street and number) Carteret General Hospital		9c. CITY, TOWN, OR LOCATION OF DEATH Morehead City	9d. INSIDE CITY LIMITS? (Yes or No) Yes
9e. COUNTY OF DEATH Carteret		10. KIND OF BUSINESS/INDUSTRY done during most of working life. Do not use retired. Elementary School	
10. MARRITAL STATUS—Married, Never Married, Widowed, Divorced (Specify) widowed		11. SURVIVING SPOUSE (If wife, give maiden name)	12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.) teacher
13a. RESIDENCE—STATE N.C.		13b. COUNTY Onslow	13c. CITY, TOWN, OR LOCATION Swansboro
13d. STREET AND NUMBER 212 Walnut Street		14. DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12) College (13-17) 16 years	
15a. INSIDE CITY LIMITS? (Yes or No) Yes	15b. ZIP CODE 28584	15c. Was Decedent of Hispanic Origin? (Specify Yes or No—If yes, specify Cuban, Mexican, Puerto Rican, etc.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Specify)	15d. RACE—American Indian, Black, White, Etc. (Specify) white

PARENTS

17. FATHER'S NAME (First, Middle, Last) William Paul Capps	18. MOTHER'S NAME (First, Middle, Maiden Surname) Lizzie Britt
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INFORMANT

19a. INFORMANT'S NAME (Type/Print) Rufus Hatsell(son)	19b. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code) 718 Phillips Dr. Swansboro, NC 28584	19c. DATE AMENDED
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CAUSE OF DEATH

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. If 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)	a. SUDDEN CARDIAC DEATH DUE TO ARRHYTHMIA	Approximate Interval Between Onset and Death < 1 hour	
	b. PROBABLE CORONARY ARTERY DISEASE		1-2 years
	c. _____		_____

20a. _____
20b. _____
20c. _____
20d. _____

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.

21a. AUTOPSY? (Yes or No) NO	21b. If yes, were findings considered in determining cause of death?	21c. Was case referred to Medical Examiner? (Yes or No) NO	22. TIME OF DEATH 19:15 M.
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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 ON 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

23a. SIGNATURE AND TITLE OF CERTIFIER <i>P. Scott Rice, M.D.</i>	23b. DATE SIGNED (Month, Day, Year) 06-11-02
---	--

DISPOSITION

24. NAME AND ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (ITEM 20) (Type or Print) DR. SCOTT P. RICE, M.D., 500 NTH. 35TH. STREET, MOREHEAD CITY, NC 28557		25. METHOD OF DISPOSITION <input checked="" type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Removal	
25a. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) Onslow Memorial Park		25c. LOCATION—City or Town, State, Zip Code Jacksonville, NC 28540	
26a. NAME AND ADDRESS OF FUNERAL HOME Jones F. Home, Swansboro, NC 28584		26c. LICENSE NUMBER 356 FS	
26b. NAME OF FUNERAL DIRECTOR <i>Paul Jones</i>		26e. LICENSE NUMBER 1915	
27. REGISTRAR'S SIGNATURE <i>Dr. J. J. Grant, Ed.D.</i>		28. DATE FILED (Month, Day, Year) 06-17-02	
26d. NAME OF EMBALMER J. Timmons Jones		26e. LICENSE NUMBER 1915	

DHHS 1872 (Revised 2/00 Review 2/02) VITAL RECORDS

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

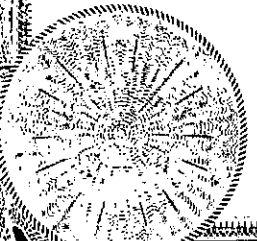
1127391

Witness my hand and official seal this the 18 day of June 2002

Melanie Arthur
Register of Deeds
Carteret County
Melanie Arthur
Deputy/Assistant-Register of Deeds

DHHS 3914 (REVISED 11/99) NC VITAL RECORDS

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



DATE *March 8 1983*
CRANTON

'83 MAR 8 AM 10 24

Excise Tax *— 0 —*

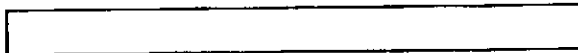
Recording Time, Book and Page

Tax Lot No. Parcel Identifier No.
Verified by County on the day of, 19 ..
by

Mail after recording to Thomas J. Pitman, Attorney, P.O. Box 909, Jacksonville, NC 28540

This instrument was prepared by Thomas J. Pitman, Attorney, P.O. Box 909, Jacksonville, NC 28540

Brief description for the Index



NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this 4th day of March, 19 83, by and between

GRANTOR

GRANTEE

Rufus
GLADYS C. HATSELL, Widow
of Onslow County, North Carolina

RUFUS GLEN HATSELL
of Onslow County, North Carolina

1405-162

Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.g. corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the City of Swansboro Township, Onslow County, North Carolina and more particularly described as follows:

Lying and being in the Town of Swansboro, North Carolina, on Walnut Street, BEGINNING at a post on Walnut Street at B.P. Davis' corner and running with Davis and Russell's line back from said Street 200 ft. to Pearl Hatsell corner; thence parallel with Walnut Street and Pearl Hatsell's line 90 ft. to a post and thence parallel with a first line herein described and Pearl Hatsell line 200 ft. to Walnut Street; thence with Walnut Street to the BEGINNING, and being the same lot devised by D.G. Ward to his daughter, Rhetta Ward, and being known as the G.G. Warl home place.

Grantor expressly reserves unto herself an estate in said land for and during the term of her natural life.

Can't find

The grantors N. C. Trott and Blanche K. Trott hereby except from this conveyance a certain lot or parcel of land formerly conveyed by them to Doctor Humphrey his heirs and assigns.

The said N. C. Trott and wife Blanche K. Trott except and reserve from this conveyance a right of way from this land along the line of C. L. Pittman Sr. and C. L. Pittman Jr. to the public road leading from Richlands N. C. to Gregory's Fork.

TO HAVE AND TO HOLD the aforesaid tract or parcel of land, and all privileges and appurtenances thereto belonging to the said C. L. Pittman, Jr. his heirs and assigns, to their only use and behoof forever.

And the said N. C. Trott and Blanche K. Trott for themselves and their heirs executors and administrators, covenant with said C. L. Pittman, Jr. his heirs and assigns, that they are seized of said premises in fee and have right to convey in fee simple; that the same are free and clear from all encumbrances, and that they do hereby forever warrant and will forever defend the said title to the same against the claims of all persons whomsoever, except the lot or parcel of land conveyed to —

IN TESTIMONY WHEREOF, the said N. C. Trott and Blanche K. Trott have hereunto set their hands and seals the day and year first above written.

Stamped and cancelled \$1.10
"Rev. Stamp Affixed".

N. C. Trott (Seal)
Blanche K. Trott (Seal)

STATE OF NORTH CAROLINA:
ONSWLOW COUNTY:

I, J. R. Shaw, J. P. do hereby certify that N. C. Trott and Blanche K. Trott his wife, personally appeared before me this day and acknowledged the due execution of the annexed Deed of Conveyance.

Witness my hand and Notarial seal, this 27th day of February, A. D. 1946.

J. R. Shaw, J. P. (Seal)

STATE OF NORTH CAROLINA:
ONSWLOW COUNTY:

The foregoing certificate of J. R. Shaw, J. P. of Onslow County, State of North Carolina, is adjudged to be correct. Let the instrument with the certificate, be registered.

Witness my hand and official seal, this 9th day of March, A. D. 1946.

Nora E. Phillips, Asst. Clerk Superior Court.

Filed for registration at 11 o'clock A. M. March 9, 1946 and duly recorded March 9, 1946.

J. B. Murrill, Register of Deeds.

=====

WARRANTY DEED

RHETTA WARD CARR & HUSBAND
TO
MARVIN HATSELL & WIFE

NORTH CAROLINA:
ONSWLOW COUNTY:

THIS DEED Made this the 22nd day of February, 1946, by Rhetta Ward Carr and husband, F. L. Carr, of Wake County, North Carolina, parties of the first part, to Marvin Hatsell and wife, Gladys Hatsell of Onslow County, North Carolina, parties of the second part:

WITNESSETH, that said parties of the first part in consideration of Ten (\$10.00) Dollars and other valuable considerations to them paid by the parties of the second part, the receipt of which is hereby acknowledged, have bargained and sold, and by these presents do grant, bargain, sell and convey to the said parties of the second part, their heirs and assigns, a certain tract or parcel of land in Onslow County, North Carolina, and described as follows:

Lying and being in the Town of Swansboro, North Carolina, on Walnut Street, beginning at a post on Walnut Street at B. F. Davis' corner and running with Davis and Russell's line back from said Street 200 ft. to Pearl Hatsell corner, thence parallel with Walnut Street and Pearl Hatsell's line 90 ft. to a post and thence parallel with a first line herein described and Pearl Hatsell line 200 ft. to Walnut Street; thence with Walnut Street to the beginning, and being the same lot devised

174

by P. G. Ward to his daughter, Rhetta Ward, and being known as the P.G. Ward home place.

TO HAVE AND TO HOLD the aforesaid tract or parcel of land and all privileges and appurtenances thereto belonging to the said parties of the second part, their heirs and assigns, to their only use and behoof forever.

And the said parties of the first part for themselves and their heirs, executors and administrators, covenant with said parties of the second part, their heirs and assigns, that they are seized of said premises in fee, and have right to convey in fee simple, that the same are free and clear from all encumbrances and that they do hereby forever warrant and will forever defend the said title to the same against the claims of all persons whomsoever.

IN TESTIMONY WHEREOF, the said Rhetta Ward Carr and husband, F. L. Carr, have hereunto set their hands and seals, the day and year first above written.

Rhetta Ward Carr (Seal)
F. L. Carr (Seal)

Stamped and cancelled \$1.10
"Rev. Stamp Affixed".

NORTH CAROLINA
WAKE COUNTY

I, W. F. Easterling, Notary Public, do hereby certify that Rhetta Ward Carr and husband, F. L. Carr, personally appeared before me this day and acknowledged the execution of the annexed deed of conveyance.

Witness my hand and Notarial seal this the 28th day of February, 1946.

W. F. Easterling, Notary Public.

W. F. Seal
My Comm. Ex. Oct. 3, 1947.

NORTH CAROLINA
WAKE COUNTY

The foregoing certificate of W. F. Easterling a Notary Public of Wake County is attested to be correct and sufficient. Let the instrument together with certificates be registered.

Witness my hand and seal this the 9 day of March, 1946.

Nora E. Phillips, Asst. Clerk Sup. Court.

Filed for registration at 11 o'clock A. M. March 9, 1946 and duly recorded March 9, 1946.

J. B. Merrill, Register of Deeds.

WARRANTY DEED

ALLISON HATCHELL
TO
MADELINE THOMPSON

NORTH CAROLINA
UNION COUNTY

THIS DEED Made this twenty fifth day of May, 1945, by Allison Hatchell, a widow of Union County, North Carolina, party of the first part, to Madeline Thompson a widow of Union County, North Carolina, party of the second part. WITNESSETH:

That the said Allison Hatchell, first part for and in consideration of the sum of the United States Dollars and no cents to him in hand paid by the party of the second part, the receipt of which is hereby acknowledged, she bargained and sold, and by these presents does bargain, sell and convey unto the said party of the second part, his heirs and assigns, forever, all that certain lot, piece or parcel of land lying and being in the settlement known as Georgetown, a short distance in a westerly direction from New River in the Township of Jacksonville, Union County, North Carolina, which lot is more particularly bounded and described as follows:

Bounded by a line beginning in the westerly boundary line of the right of way of the Atlantic Coast Line Railroad Company at a forked tree (known as the Hedge Bush) and a short distance northwesterly from the main residence of Allison Hatchell; running thence about North 74 degrees West 210 feet; running thence in a somewhat northeasterly direction exactly parallel with the said right of way line of said railroad, 41 feet; running thence about South 74 degrees east 230 feet to the line of said right of

208-174