

DEATH NOTICE

IN TERMS OF SECTION 7 OF THE ADMINISTRATION OF ESTATES ACT, 1965

1. Surname of deceased NEILSON
2. First names FRANCES JANE (also known as FANNY JANE)
3. Identity number 901516 334
4. Race WHITE
5. Nationality S.African
6. Occupation Housewife
7. Ordinary place(s) of residence during the 12 months prior to death
7 Alliance Road,
Selcourt, Springs
8. Date of birth 23rd February 1892
9. Place of birth Vereeniging
10. Date of death 9th January 1975
11. Place of death Springs
12. Has the deceased left (mark with a cross where applicable)

Movable property		Immovable		<i>will</i> A will <i>No will</i>	X	An estate exceeding R2,000 in value	X
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13. Marital status at time of death WIDOW
14. If married, place where married N/A
15. Full names of surviving spouse N/A
16. State whether marriage was in or out of community of property N/A
17. Name(s) of predeceased spouse(s) and of divorced spouse(s):
JAMES NEILSON

~~Predeceased/Divorced~~
Predeceased/Divorced

18. Full names of children of each marriage (state whether major or minor or predeceased and in the latter event, whether they left issue and, if that be the case, the full names of such issue):
NO CHILDREN

19. Names of parents of deceased:
 Father UNKNOWN Alive/Deceased
 Mother UNKNOWN Alive/Deceased
 Dated at SPRINGS the 19th day of
February, 19 75

[Signature]
Signature

* Capacity Nephew of deceased
~~Present at death/Identified the deceased after death.~~
attended funeral

* State whether signatory is surviving spouse or nearest relative or connection residing in district in which death has taken place, or is caused by such spouse, relative or connection to give this notice, or is required by Master to submit this death notice.

B/C m

Will of One Person

MARRIED OR UNMARRIED

To all whom it may concern:

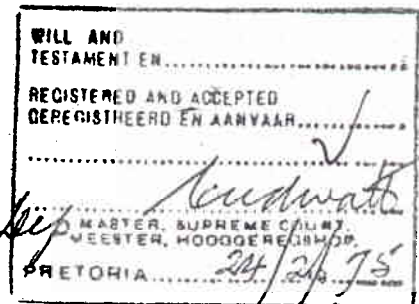
I, the undersigned,

Fanny Jane Neilson (born Reid)
of *Springs*
do hereby revoke all former testamentary dispositions and declare this to be my last will and testatment:—

1. I do hereby declare, nominate and appoint *William Reid Grant and Jan Brookshank Grant (Nephews)* of *Springs* and *Mrs. Anabel Foot (born Reid) niece* to be the sole and universal heirs of my estate and effects movable or immovable, whether the same be in possession, reversion, remainder or expectancy, nothing excepted.

Deed See Death Certificate.
2. I do further appoint *John M. Grant* as Executor of this my Will granting to him all power and authority allowed by law and especially that of assumption.

3. I do further direct the Master of the Supreme Court to dispense with security from my said Executor for the administration of my said Estate.



Dated at *Springs*
this *20th* day of *February*
One Thousand Nine Hundred and *1960*.
in the year of Our Lord

Signed and Acknowledged by the said
Fanny Jane Neilson

as his last Will and Testament in the presence of us, the subscribed Witnesses, being present at the same time, and who at his request and in his presence and in the presence of each other have hereunto set our names.

Testator *Fanny Jane Neilson.*

Witnesses:

- 1 *Robert Sellar Anderson*
- 2 *W. J. Davis*