

CARTON 5:8

LEE BROWN

R. ALLEN FILES - ESTATE/WILL 1997-2002

2017/193





P.O. BOX 2730 • Rapid City, SD 57709-2730

July 17, 1997

LEE BROWN  
PO BOX 421031  
SAN FRANCISCO CA 94142-1031

RE: Policy #2-734427  
SENTINEL LIFE

We have received your request for information regarding the current beneficiary designations on your policy.

Our records show your beneficiaries are listed as --

Primary Beneficiary:        ROBERT L ALLEN,  
   (REVOCABLE)

Contingent Beneficiary:    HASINAH RAHIM (SISTER-IN-LAW)

We consider you a valuable policyholder and we have appreciated having the opportunity to serve you. If you have any further questions regarding your policy, please contact our office at 1-800-255-9707.

Sincerely,

SUE PARROTT  
Customer Service Representative



Lee Brown 1997  
Insurance doc Documents  
Will



Milton Furman  
861-1478  
3 Baussat St  
C.

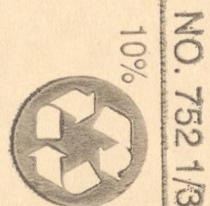
Harold Rubin  
577-1419

386-5831  
Alex / Moralle  
431-4900  
Dussan and Furman  
Home  
861-9866  
FAX  
~~601-9866~~  
8900

504 244-6174  
Demich

2nd Policy  
#2 728858  
Alex Bagwell  
beneficiary

Oxford®  
ESSEITE



Lee Brown 1997  
Insurance doc Document  
in 111



FD # 44

FDR # 768

Miguel La Q Va  
Vaughn O. Nixon  
Duggan's Funeral Service  
The Duggan Welch Family

3434 - 17th Street  
San Francisco, CA 94110

415-431-4900  
Fax 861-9866  
Res. 681-9593



The Duggan Welch Family  
Duggan's Funeral Service

*Nigel A. La Qua*

3434 Seventeenth Street, San Francisco, CA 94110  
(415) 431-4900 Fax: 861-9866

*E-Mail: Nigel@Laqua.com*



P

415-~~672~~

3983

⑦

00.56hh



Milton - Special

861-1472 Rd mty

Duggan funeral home  
Nigel 172 Hvalby  
3434 170 St Nigel 471  
died book in 4900

✓ Call Alex Pines  
Local 2

864-8770 x717

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Call Am Memorial  
✓ Ins Co re 2nd  
policy

Alex Bagwell

Margue?  
401-7217

2 728858

\$500  
silly

---

Call Marjorie Chawla  
to thank

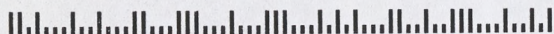




21780824291704055130033871487864

Account Number	Service To	Amount Due	Due Date
MRG45 51303-8	5/15/02	\$87.86	6/17/02

J:2.55.13128 1 AV 0.255



LEE BROWN  
940 FILLMORE ST #B  
SN FRANCISCO CA 94117-1753

*Called + Called  
since 7/5/02*

6/13

Please return this portion with your pay

## 48-Hour Notice

Questions? Contact us at  
1-800-743-5000.

Assistance is available by  
telephone 24 hours per  
day, 7 days per week.

The customer service office  
address for your area is:

2435 MISSION ST  
SN FRANCISCO CA 94110

LEE BROWN  
940 FILLMORE ST #B  
SN FRANCISCO CA 94117

APT

Rate Schedule

EL 1TB GL1TM

*David West  
415 239-6574  
told David was  
Nomi boy*

*Minister  
Christopher  
Muhammad  
Mosque  
Wants to make  
presentation at Memorial  
Call David abt*

*7/5 call  
Pac Bell to  
discontinue  
phone service*

De

This

You

not

To

You

fee

tran

as previously billed.

ment if the past-due

our local offices, pays

or Discover), call 1-800-555-5555  
with credit card transaction and each ATM

If an extension agreement is made but not kept, your service may be shut off without further notice.

Please see important customer information on the back of this notice.

If payment has already been made, thank you, and please disregard this notice.



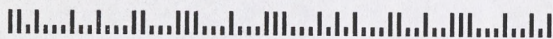




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940 FILLMORE ST #B  
SN FRANCISCO CA 94117-1753

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6/13

Please return this portion with your payment. Thank you.

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LEE BROWN  
940 FILLMORE ST #B  
SN FRANCISCO CA 94117

APT

Account Number	Service To
MRG45 51303-8	5/15/02

Past Due	Due Date
\$49.15	6/17/02

Current Due	Total Due
\$38.71	\$87.86

Rate Schedule

EL 1TB GL1TM



# PAST DUE

*\$ 87.86  
Trans for 6.95 5pm  
paid 6/25  
code:  
1760865224*

Dear Customer:

This is not a new bill but a request for payment of services previously billed.

Your utility service is scheduled to be shut off for non-payment if the past-due amount is not received on or before 6/17/02.

To avoid termination, payment should be made at any of our local offices, paystations or by phone, not by mail.

You can pay by phone using an **ATM** or credit card (**VISA** or **Discover**), call 1-800-891-8626 any time. A fee is charged by our independent service provider for each credit card transaction and each **ATM** transaction.

If an extension agreement is made but not kept, your service may be shut off without further notice.

Please see important customer information on the back of this notice.

If payment has already been made, thank you, and please disregard this notice.





## ASSIGNMENT OF INSURANCE BENEFITS

FOR VALUE RECEIVED, I / WE, THE UNDERSIGNED BENEFICIARIES UNDER THE INSURANCE POLICY (S), OR DEATH BENEFIT CERTIFICATE NUMBER, OR BEING THE PERSON EQUITABLY ENTITLED TO THE BENEFITS, REFUND OF PREMIUMS AND INTEREST THEREUNDER.

POLICY NUMBER (S) \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
ISSUED BY \_\_\_\_\_ INSURANCE COMPANY FOR THE AMOUNT OF  
(\$ \_\_\_\_\_)  
ON THE LIFE OF \_\_\_\_\_ DO HEREBY ASSIGN, SET OVER  
AND TRANSFER UNTO

**DUGGAN'S FUNERAL SERVICE / THE DUGGAN WELCH FAMILY**  
3434-17<sup>th</sup> Street, San Francisco, CA 94110 (415) 431 4900

THE SUM OF \_\_\_\_\_  
(\$ \_\_\_\_\_) WHICH IS TO BE PAID FROM THE BENEFITS, REFUND OF PREMIUMS OR  
INTEREST OF THE ABOVE POLICY(S)  
OR CERTIFICATE (S) THE CONSIDERATION FOR THE ASSIGNMENT OF THIS AMOUNT BEING  
THE FUNERAL SERVICES / MERCHANDISE RENDERED IN THE BURIAL OF SAID DECEASED.

I / WE HEREBY APPOINT **DUGGAN'S FUNERAL SERVICE / THE DUGGAN WELCH FAMILY** AS OUR **ATTORNEY IN FACT** TO ACT FOR US WITH FULL POWER TO MAKE COLLECTION OF, COMPROMISE, SETTLE AND TO ENDORSE OR RECEIPT IN OUR NAME OR OTHERWISE, ANY CHECK, DRAFT, RECEIPT OR RELEASE FOR THE PROCEEDS OF SAID POLICY OF INSURANCE OR CERTIFICATE AND TO PROCESS ALL NECESSARY FORMS, EXECUTE PROOFS OF LOSS OR PROOFS OF CLAIM AND EXECUTE ALL NECESSARY PAPERWORK TO OBTAIN SAID INSURANCE PROCEEDS, AS FULLY TO ALL INTENT AND PURPOSES AS WE OURSELVES COULD DO, HEREBY RATIFYING AND CONFIRMING ALL THAT OUR SAID ATTORNEY MAY DO OR CAUSE TO BE DONE BY VIRTUE HEREOF. I/WE ALSO AUTHORIZE AND DIRECT YOUR COMPANY TO RELEASE ANY INFORMATION REGARDING THE POLICY (S) TO DUGGAN'S FUNERAL SERVICE / THE DUGGAN WELCH FAMILY.

IN WITNESS WHEREOF I / WE HEREUNTO SET OUR HAND AND SEALS AT SAN FRANCISCO, CALIFORNIA THIS 5 DAY OF July, 2002

SIGNATURE X Robert Allen PRINT NAME Robert Allen  
ADDRESS 1034 Vallejo St. DOB \_\_\_\_\_ SS# 259-62-7232

SIGNATURE \_\_\_\_\_ PRINT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_

SIGNATURE \_\_\_\_\_ PRINT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_

SIGNATURE \_\_\_\_\_ PRINT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_

### WITNESS

WITNESS \_\_\_\_\_ WITNESS \_\_\_\_\_

PRINT NAME \_\_\_\_\_ PRINT NAME \_\_\_\_\_





P.O. BOX 2730 • Rapid City, SD 57709-2730

July 17, 1997

LEE BROWN  
PO BOX 421031  
SAN FRANCISCO CA 94142-1031

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SENTINEL LIFE

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Primary Beneficiary: ROBERT L ALLEN,  
(REVOCABLE)

Contingent Beneficiary: HASINAH RAHIM (SISTER-IN-LAW)

We consider you a valuable policyholder and we have appreciated having the opportunity to serve you. If you have any further questions regarding your policy, please contact our office at 1-800-255-9707.

816-9046

Sincerely,

SUE PARROTT  
Customer Service Representative



8500



## ASSIGNMENT OF INSURANCE BENEFITS

FOR VALUE RECEIVED, I / WE, THE UNDERSIGNED BENEFICIARIES UNDER THE INSURANCE POLICY (S), OR DEATH BENEFIT CERTIFICATE NUMBER, OR BEING THE PERSON EQUITABLY ENTITLED TO THE BENEFITS, REFUND OF PREMIUMS AND INTEREST THEREUNDER.

POLICY NUMBER (S) 2-734427  
 ISSUED BY American Memorial INSURANCE COMPANY FOR THE AMOUNT OF  
Five Hundred (\$ 500-)  
 ON THE LIFE OF Lee Brown DO HEREBY ASSIGN, SET OVER  
 AND TRANSFER UNTO

DUGGAN'S FUNERAL SERVICE / THE DUGGAN WELCH FAMILY  
 3434-17<sup>th</sup> Street, San Francisco, CA 94110 (415) 431 4900

THE SUM OF Five Hundred  
 (\$ 500-) WHICH IS TO BE PAID FROM THE BENEFITS, REFUND OF PREMIUMS OR  
 INTEREST OF THE ABOVE POLICY(S)  
 OR CERTIFICATE (S) THE CONSIDERATION FOR THE ASSIGNMENT OF THIS AMOUNT BEING  
 THE FUNERAL SERVICES / MERCHANDISE RENDERED IN THE BURIAL OF SAID DECEASED

I / WE HEREBY APPOINT DUGGAN'S FUNERAL SERVICE / THE DUGGAN WELCH  
 FAMILY AS OUR ATTORNEY IN FACT TO ACT FOR US WITH FULL POWER TO MAKE  
 COLLECTION OF, COMPROMISE, SETTLE AND TO ENDORSE OR RECEIPT IN OUR NAME OR  
 OTHERWISE, ANY CHECK, DRAFT, RECEIPT OR RELEASE FOR THE PROCEEDS OF SAID  
 POLICY OF INSURANCE OR CERTIFICATE AND TO PROCESS ALL NECESSARY FORMS,  
 EXECUTE PROOFS OF LOSS OR PROOFS OF CLAIM AND EXECUTE ALL NECESSARY  
 PAPERWORK TO OBTAIN SAID INSURANCE PROCEEDS, AS FULLY TO ALL INTENT AND  
 PURPOSES AS WE OURSELVES COULD DO, HEREBY RATIFYING AND CONFIRMING ALL  
 THAT OUR SAID ATTORNEY MAY DO OR CAUSE TO BE DONE BY VIRTUE HEREOF I/WE  
 ALSO AUTHORIZE AND DIRECT YOUR COMPANY TO RELEASE ANY INFORMATION  
 REGARDING THE POLICY (S) TO DUGGAN'S FUNERAL SERVICE / THE DUGGAN WELCH  
 FAMILY

IN WITNESS WHEREOF, I / WE HEREUNTO SET OUR HAND AND SEALS AT SAN FRANCISCO  
 CALIFORNIA THIS 2 DAY OF July 2002

SIGNATURE Robert Allen PRINT NAME Robert L. Allen  
 ADDRESS 1834 Vallejo, SF 94133 DOB SSN 259-62-7232

SIGNATURE \_\_\_\_\_ PRINT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ DOB \_\_\_\_\_ SSN \_\_\_\_\_

SIGNATURE \_\_\_\_\_ PRINT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ DOB \_\_\_\_\_ SSN \_\_\_\_\_

SIGNATURE \_\_\_\_\_ PRINT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ DOB \_\_\_\_\_ SSN \_\_\_\_\_

### WITNESS

WITNESS \_\_\_\_\_ WITNESS \_\_\_\_\_

PRINT NAME \_\_\_\_\_ PRINT NAME \_\_\_\_\_



LAST WILL AND TESTAMENT

OF

LEE BROWN

I, LEE BROWN, residing in the County of San Francisco, State of California, do hereby make, publish and declare the following to be my Last Will and Testament, and hereby revoke all former Wills and Codicils made by me.

FIRST: I hereby declare that I am a widower. My late wife's name was OLIVA BROWN. I had a son, LEE BROWN, JR. deceased. I have no other children, either living or deceased.

SECOND: It is my intention to dispose hereby of any and all property over which I have the power of disposition, including any and all property as to which I may have a power of appointment.

THIRD: I direct my Executor, hereinafter named to make all arrangements for my cremation.

FOURTH: I hereby give, devise and bequeath all of my estate both real and personal, and wheresoever situated, to my friend, ROBERT L. ALLEN of San Francisco, California, provided, further, however, that if ROBERT L. ALLEN fails to survive me by a period of 30 days, then I hereby give, devise and bequeath all of my estate to HASINAH RAHIM of San Francisco, California.

FIFTH: All estate, inheritance, and other death taxes or duties assessed by reason of my death in connection with assets passing through probate or outside of probate shall be paid by the personal representative of my estate out of the residue thereof and shall not be charged against nor collected from any beneficiary or transferee of any property passing through or outside of probate.

SIXTH: I hereby nominate and appoint ROBERT L. ALLEN of 1034 Vallejo Street, San Francisco, California to serve as Executor hereof; provided, however, that if said ROBERT L. ALLEN is deceased, or otherwise unable, unwilling, or ceases to act as such Executor, I hereby nominate and appoint HASINAH RAHIM of 120 10th Street, San Francisco, California to serve as Executrix hereunder. No person named herein to serve as Executor or Executrix shall be required to post bond.



SEVENTH: I hereby authorize any personal representative, serving hereunder, to sell at either public or private sale, lease, and/or encumber by mortgage, deed of trust or otherwise, any property belonging to my estate, either with or without notice, subject to such confirmation as may be required by law; and further, to hold, manage, operate, invest, and or reinvest any such property or its proceeds.

EIGHTH: Except as otherwise specifically provided in this Will, I have intentionally and with full knowledge omitted to provide for my other heirs.

If any beneficiary under this Will or any person who would be entitled to share in my estate if I died intestate, in any manner, either directly or indirectly, objects to or contests the probate hereof or the distribution or disposal of my estate as directed herein, or in any way hinders the carrying out of the letter or spirit of any of the terms of this Will, any share or interest in my estate given to that objecting or contesting beneficiary under this Will is revoked and I direct that any objector or contestant take nothing by this Will and that all property which would have gone to such person be disposed of in the same manner provided herein as if such person had predeceased me.

NINTH: If any provision of this Will shall be held to be invalid, I direct that such invalidity shall not affect the validity of the remaining provisions, and that all such remaining provisions shall continue to be fully effective.

Signed on November 21<sup>st</sup>, 1997, at San Francisco, California.

---

LEE BROWN

On the date written below, the testator, LEE BROWN declared to us that this instrument, consisting of THREE (3) pages including this page, was the testator's will and asked us to witness it. The testator then signed this will in our presence, all of us being present at the same time. At the testator's request, in the testator's presence, and in the presence of one another, we subscribe our names as witnesses.



We believe that the testator is over age 18, is of sound mind,  
and is under no constraint or undue influence.

TOM TALLMAN

[Signature of witness]

Ernest W. ABEL

[Signature of witness]

We declare under penalty of perjury that the foregoing is true and  
correct and that this declaration was executed on November 21<sup>st</sup>,  
1997, at San Francisco, California.

TOM TALLMAN

[Signature of witness]

Ernest W. ABEL

[Signature of witness]

NAME & ADDRESS:

TOM TALLMAN

1453 Mission St. #500

S.F. Ca. 94103

NAME & ADDRESS:

ERNEST W. ABEL

1453 Mission St. #500

S.F. Ca. 94127



(1)

San Francisco  
9/13/97

From Lee Brown  
to Robert L. Allen:

Dear Robert,

Could you please  
type up a letter for  
me to have available for  
the building inspectors who  
~~are~~ will probably make  
their rounds soon.

I want to tell them  
that I'm in the process  
of removing most of  
my books, magazines, ~~and~~  
newspapers, I would also  
and other papers.



(2)

like to place  
them in the Bancroft Library at  
U.C. Berkeley, ~~in the~~  
Labor Archives at  
S.F. State University,  
~~and for the S.F. Public~~  
~~Library~~ and for  
the ILWU Library.

Thank you,  
Robert

Sincerely,  
Lee



1922 Letter  
on the  
Hudson



ARTHUR H. COLEMAN, M.D., INC.  
A PROFESSIONAL CORPORATION  
6301 THIRD STREET  
SAN FRANCISCO, CALIFORNIA 94124  
—  
TELEPHONE (415) 467-1400

November 19, 1997

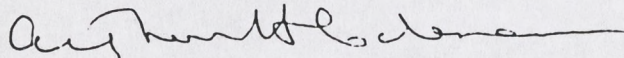
To : Paratransit Broker

Re : Mr. Lee Brown

This is to verify that the above is under treatment for heart failure and poor circulation of his legs due to diabetes mellitus.

Both conditions impedes his walking.

Sincerely,



Arthur H. Coleman, M.D.

AHC/js

CC : Mr. Lee Brown



MEMO

To: Jill Rothenberg

From: Robert L. Allen

Subj.: Notes regarding my role in Lee Brown book

Aside from organizing and editing the material I am gathering from Lee Brown, there are four ways in which I could directly contribute to contextualizing and providing connective material for the book:

1. -- I see myself writing a general introduction to Lee Brown's memoir, describing the background of the black community in New Orleans and the background of the labor movement. I would also tell the story of the establishment of Local 207 and its early history, drawing upon archival material at ILWU headquarters in San Francisco. I might also write some about how I met Lee, my impressions of him, how our relationship has developed.
2. -- I think it also makes sense for me to write a brief (1-2 page) introduction to each chapter, to give the setting and context, and to weave in comments within each chapter, where appropriate, to clarify or elaborate as needed. For example, such comments could be valuable in providing background on Paul Robeson when Lee talks about the time he spent as Robeson's bodyguard; describing the conditions facing black actors in Hollywood during the period when Lee worked with the Los Angeles chapter of the NAACP; looking at the role of the Communist party in the black community; outlining the situation of black hotel workers in San Francisco in



the early Sixties when Lee arrived; giving background information on the Black Panthers, Nation of Islam, senior citizens groups and other organizations with which Lee worked in San Francisco. I don't see these comments as lengthy discussions but more like <sup>extended</sup> footnotes or mini-appendices woven into the flow of the text to give readers the context of Lee's story at each turning point.

3. -- Certain chapters I would mainly write: for example, since Lee did not testify at the HUAC hearing and his subsequent trial under the Taft-Hartley law I would recount these events using the transcripts as sources. This would be similar to the way in which I recreated the trial in my book, The Port Chicago Mutiny, but in a more abbreviated form. Although Lee did not testify I think these sections could be enlivened by having Lee offer a running commentary on the characters and events, the kind of things he might have said as he sat watching the trial.

4. -- At the end of the book we could have a dialog/interview between myself and Lee about how he sees the future of the labor movement and race relations in the U.S. This would be an opportunity for Lee to sum up his experience and for us to talk about the relevance of his experience to the social, economic and racial conditions we face on the eve of the 21st century. It could also round out the sense of personal connection between the two of us.