RECORDING REQUESTED BY

Diane Sullivan

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENT TO:
(NewOwner)

NAME DIANE & TOM SULLIVAN

STREET ADDRESS 4126 MAXWELL RD

CITY, STATE & ZIP CODE ANTIOCH, TN 37013

TITLE ORDER NO _____ ESCROW NO _____

BOOK 11334 PAGE 244

0547240

IDENTIFICATION REFERENCE

99 FEB -9 PM 2:38

DAVIDSON COUNTY REGISTER
DAVIDSON COUNTY, TN.

PICK-UP

STATE OF TENNESSEE
COUNTY OF DAVIDSON

THE ACTUAL CONSIDERATION OR TRUE VALUE, WHICHEVER IS GREATER, FOR THIS TRANSFER IS $ -0-

Thomas J. Sullivan
AFFIANT

SUBSCRIBED AND SWORN TO BEFORE ME, THIS THE 9th DAY OF Feb 1999.

Joni B Hayes
Deputy Register

DOCUM
com
com
encl

Signature

QUITCLAIM DEED

Pat Dundee
Name of Grantors

the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do I hereby remise, release and forever quitclaim to Diane D. Sullivan & Thomas J. Sullivan
Name of Grantee(s)

the following described real property in the City of ANTIOCH, County of DAVIDSON, State of TN

LOT 6 ON THE UNRECORDED PLAN OF EMERSON N STEWART SUBDIVISION, BEING ALL THE PROPERTY DESCRIBED IN DEED BOOK 8019, PAGE 372 OF THE DAVIDSON COUNTY REGISTRAR'S OFFICE.
A ONE STORY FRAME DWELLING KNOWN AS 4126 MAXWELL RD, WHICH IS LOCATED ON THE NORTH SIDE OF MAXWELL ROAD AND, WEST OF LAVERGNE COUCHVILLE PIKE
Source of last title book 8019 pg 372
being the same property conveyed to Pat Dundee by deed recorded in book 4958 page 772.

Assessor's parcel No. MAP/PAR: 175-00-0 062.00 SA/FB: 02D 32160

Executed on FEBRUARY 8 1999, at THE COUNTY OF DAVIDSON, NASHVILLE TN
City and State

7957 02/09 0101 03CHECK 10.00

STATE OF Tennessee
COUNTY OF Davidson

GRANTOR: Pat Dundee

GRANTEES: Diane D. Sullivan & Thomas J. Sullivan

On 8th February 1999 before me, Susan J Skinner
(NAME/TITLE e.g. JANE DOE, NOTARY PUBLIC)

personally appeared Diane Sullivan 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.

Susan J Skinner
(SIGNATURE OF NOTARY) SEAL

RIGHT THUMBPRINT (Optional)

CAPACITY CLAIMED BY SIGNER(S)
☐ INDIVIDUAL(S)
☐ CORPORATE
OFFICER(S) _____
☐ PARTNER(S) (TITLES) ☐ LIMITED ☐ GENERAL
☐ ATTORNEY IN FACT
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER: _____

SIGNER IS REPRESENTING:
Name of Person(s) or Entity(ies)

MAIL TAX STATEMENTS TO: _____

PREPARED BY: DIANE D. SULLIVAN
4848 PEPPERTREE DR.
ANTIOCH, TN 37013

SBR98

RECORDERS MEMO
LEGIBILITY OF WRITING, TYPING OR
PRINTING IN THIS DOCUMENT
UNSATISFACTORY WHEN RECEIVED