THIS INSTRUMENT PREPARED BY: LARRY D. CRAIG, ATTORNEY AT LAW, 305 FOURTEENTH AVENUE, NORTH, NASHVILLE, TENNESSEE 37203

# QUITCLAIM DEED

| ADDRESS NEW OWNER AS FOLLOWS: | SEND TAX BILLS TO: | MAP-PARCEL NUMBERS |
|---|---|---|
| Gina Wallace and<br>Tere Lynn Clark<br>806 Northwest 13th Street<br>Bentonville, Arkansas 72712 | Same | Map 026-01-0<br>Parcel 108.00 |

FOR AND IN CONSIDERATION of love and affection (and no monetary consideration) and for the express purpose of making a re-conveyance to create a joint tenancy with rights of survivorship, I, Gina Wallace, surviving joint tenant with the right of survivorship following the death of Beverly F. Clark on November 19, 2011, by these presents do hereby quitclaim all of my interest unto Larry D. Craig, Trustee, his successors and assigns, as to the following described tract or parcel of land, to wit:

Being Lot No. 18 on the map of the W.C. Moncrief & Co. Inc. subdivision of The Looney land, said tract being an unrecorded subdivision of land, in Goodlettsville, Tennessee.

Said Lot No. 18 fronts seventy-five feet on the easterly margin of the Goodlettsville Pike, and runs back to the right of way of the L. & N. R.R., and measures 506 feet on its southerly margin, 582 feet on its northerly margin and 148 feet along the right of way of the L. & N. R.R..

Being the same property conveyed to Beverly F. Clark and Gina Wallace, expressly as joint tenants with right of survivorship, and not as tenants in common, by deed from Larry D. Craig, Trustee, of record in Instrument No. 20030710-0095311, Register's Office for Davidson County, Tennessee. A copy of the death certificate of the said Beverly F. Clark who died on November 19, 2011, is attached hereto, and by said joint tenant's death vested into the survivor, the said Gina Wallace.

Beverly F. Clark was one and the same person as Beverly Faye Clark.

This is the same legal description as set forth on the previous deed of record.

This conveyance is subject to any and all existing restrictions, setbacks, zoning regulations, covenants, conditions and easements of record as may affect the aforedescribed tract of land.

This is improved property known as 128 Two Mile Pike, Goodlettsville, Tennessee 37072.

This instrument prepared upon information furnished by the parties and without benefit of title examination, title insurance or closing thereupon.

Said property is conveyed subject to such limitations, restrictions, and encumbrances as may affect the premises.

And now, I, the said Larry D. Craig, Trustee, for the express purpose of carrying out the intent of this conveyance, as above set out, do hereby quitclaim and convey unto Gina Wallace and Tere Lynn Clark, expressly as joint tenants with rights of survivorship, not as tenants in common, their heirs and assigns, the same interest in the same property hereinabove described and set forth, to which reference is here made, and said property is conveyed subject to the same limitations, restrictions and encumbrances as may affect the premises, as above set forth.

IN WITNESS WHEREOF, we have hereunto set our hands on the respective dates of execution below.

BILL GARRETT, Davidson County
Trans: T20140023392 DEEDQC
Recvd: 04/07/14 14:11 3 pgs
Fees: 22.00 Taxes: 0.00
20140407-0028934

Gina Wallace
GINA WALLACE
DATED: 3/27/14

LARRY D. CRAIG, TRUSTEE
DATED: 4-4-2014

STATE OF ARKANSAS
COUNTY OF WASHINTON

Personally appeared before me, the undersigned, a notary public in and for said County and State, the within named Gina Wallace, the bargainor, with whom I am personally acquainted, and who acknowledged that she executed the within instrument for the purposes therein contained.

Witness my hand and official seal at Wash. Co., Arkansas, this 27th day of March, 2014.

WILLIAM R. MAYO
Notary Public - Arkansas
WASHINGTON COUNTY
My Commission Expires 02-22-2022
Commission #12386528

NOTARY PUBLIC

My commission expires:

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Personally appeared before me, the undersigned, a notary public in and for said County and State, the within named Larry D. Craig, the Trustee, with whom I am personally acquainted, and who acknowledged that he, as Trustee, executed the within instrument for the purposes therein contained.

Witness my hand and official seal at Nashville, Tennessee, this 4th day of April, 2014.

NOTARY PUBLIC

My commission expires: 03-07-17

STATE OF ~~ARKANSAS~~ TENNESSEE
COUNTY OF Davidson

The consideration or value, whichever is greater, for this transfer is $0.00 to create a joint tenancy with rights of survivorship.

AFFIANT

Sworn to and subscribed before me this 4th day of April, 2014.

NOTARY PUBLIC

My Commission Expires: 03-07-17

# STATE OF TENNESSEE
## Office of Vital Records

Amended by Affidavit of Funeral Director & Informant 6/18/2012 JT

TYPE/PRINT IN PERMANENT BLACK INK - SEE INSTRUCTIONS

TENNESSEE DEPARTMENT OF HEALTH
**CERTIFICATE OF DEATH**

STATE FILE NUMBER 2011 055820

**DECEDENT**

1. DECEDENT'S NAME: Beverly Faye Clark
2. SEX: Female
3. DATE OF DEATH: November 19, 2011
4. SOCIAL SECURITY NUMBER: [redacted]-6068
5. DATE OF BIRTH: February 21, 1938
6. BIRTHPLACE: Madison, Tennessee
7. WAS DECEDENT EVER IN U.S. ARMED FORCES? No
8. MARITAL STATUS: Divorced
9. SURVIVING SPOUSE: N/A
10. PLACE OF DEATH: Inpatient
11. FACILITY NAME: 128 Two Mile Pike
12. CITY, TOWN, OR LOCATION OF DEATH: Goodlettsville
13. COUNTY OF DEATH: Davidson
14. DECEDENT'S USUAL OCCUPATION: X-Ray Lab Technician
15. KIND OF BUSINESS/INDUSTRY: Healthcare
16. RESIDENCE-STATE: Tennessee
17. COUNTY: Davidson
18. CITY, TOWN OR LOCATION: Goodlettsville
19. STREET AND NUMBER OR RURAL LOCATION: 128 Two Mile Pike
20. INSIDE CITY LIMITS? Yes
21. ZIP CODE: 37072
22. WAS DECEDENT OF HISPANIC ORIGIN? No
23. RACE: White
24. DECEDENT'S EDUCATION: 10

**PARENTS**

25. FATHER'S NAME: William Moten Clark
26. MOTHER'S NAME: Helen Holloway

**INFORMANT**

27. INFORMANT'S NAME: ~~Tara Clark~~ Gina Wallace
28. RELATIONSHIP TO DECEASED: Daughter
29. MAILING ADDRESS: 806 Northwest 13th Street, Bentonville, AR 72712

**DISPOSITION**

30. METHOD OF DISPOSITION: Burial
30a. PLACE OF DISPOSITION: Spring Hill Cemetery
30b. LOCATION: Nashville, Tennessee
31. SIGNATURE OF FUNERAL DIRECTOR: Nathaniel Holman
31b. LICENSE NUMBER OF FUNERAL DIRECTOR: 5974
31c. SIGNATURE OF EMBALMER: John Pfeifer
31d. LICENSE NUMBER OF EMBALMER: 5319
32a. NAME AND ADDRESS OF FUNERAL HOME: Spring Hill Funeral Home & Cemetery, 5110 Gallatin Road Nashville, TN 37216
32b. LICENSE NUMBER OF FUNERAL HOME: 1046

**MEDICAL CERTIFICATION**

33. REGISTRAR'S SIGNATURE: Linda L. Boulware
33a. DATE FILED: December 5, 2011

**CERTIFIER**

34. To the best of my knowledge, death occurred at the time, date and place, and due to the cause(s) and manner as stated.
SIGNATURE AND TITLE OF CERTIFIER
34b. LICENSE NUMBER: 30045
34c. DATE SIGNED: 11-30-11
35. MEDICAL EXAMINER - On the basis of examination and/or investigation, in my opinion, death occurred at the time, date and place, and due to the cause(s) and manner as stated.
SIGNATURE AND TITLE OF MEDICAL EXAMINER
35b. LICENSE NUMBER
35c. DATE SIGNED
36. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER): Robert Z. Lin M.D. 740 Gallatin Dr Goodlettsville, TN 37072

PERSON OR MEDICAL EXAMINER EXECUTING CERTIFICATE MUST COMPLETE ITEMS 33 AND 34 MEDICAL CERTIFICATION WITHIN 48 HOURS.

**CAUSE OF DEATH**

37. 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. List only one cause on each line.
Approximate Interval Between Onset and Death

SEE INSTRUCTIONS ON OTHER SIDE

IMMEDIATE CAUSE (Final disease or condition resulting in death): a. Coronary artery disease
DUE TO (OR AS A CONSEQUENCE OF):
Sequentially list conditions, if any, leading to the immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated the events resulting in death) LAST
b. DUE TO (OR AS A CONSEQUENCE OF):
c. DUE TO (OR AS A CONSEQUENCE OF):

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.
Diabetes II, hypertension, hyperlipidemia, PVD

37a. WAS AN AUTOPSY PERFORMED? No
37b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? No

38. MANNER OF DEATH: Natural
38a. DATE OF INJURY
38b. TIME OF INJURY
38c. INJURY AT WORK?
38d. DESCRIBE HOW INJURY OCCURRED
38e. PLACE OF INJURY (At home, farm, street, factory, office)
38f. LOCATION (Street and Number or Rural Route Number, City or Town, State)

*10, 12a, 19a

5281418

I hereby certify the above to be a true and correct copy of the original document on file in this department. This certified copy is valid only when printed on security paper showing the red embossed seal of the Department of Health. Alteration or erasure voids this certification.

Tennessee Code Annotated 68-3-101 et seq., Vital Records Act of 1977.

Tonya Y. Foreman, Local Registrar
Davidson County, Tennessee

Teresa S. Hendricks
STATE REGISTRAR

8/8/2012
Date Issued

CERTIFICATION OF VITAL RECORD