Prepared by:
Realty Title & Escrow Company, Inc.
383 Johnny Cash Parkway, Suite 140
Hendersonville, TN 37075

Davidson County DEEDWARR
Recvd: 07/09/15 11:09 4 pgs
Fees:23.00 Taxes:592.00
20150709-0066707

STATE OF TENNESSEE
COUNTY OF SUMNER
The actual consideration or value, whichever is greater, for this transfer is $160,000.00.

Affiant

Subscribed and sworn to before me, this 20 day of Jan, 2015.

Notary Public
My commission expires: ~~04/17/16~~ 2/25/19

JAMES C. SMITH
STATE OF TENNESSEE
NOTARY PUBLIC
WILLIAMSON COUNTY

05-1506-66587

Address of New Owner:	**Send Tax Bills to:**	**Tax Information:**
John A. Cantrell, Jr. 083.00 1252 Shawnee Road Madison TN 37115	Caliber Home Loans Inc 3701 Regent Blvd ste 200 Irving TX 75063	052-12-0-083.00

WARRANTY DEED

For and in consideration of the sum of ten dollars & no/100 ($10.00), cash in hand paid by the hereinafter named Grantees, and other good and valuable consideration, the receipt of which is hereby acknowledged, **Diane J. Fullam**, an unmarried woman, hereinafter referred to as Grantors, have bargained and sold, and do hereby transfer and convey to **John A. Cantrell, Jr.**, hereinafter called the Grantees, their successors and assigns, a certain tract or parcel of land in Davidson County, State of Tennessee, described as follows: to- wit:

Land in Davidson County, Tennessee, being Lot No. 22, on the Plan of Sequoia Valley, Section 2, of record in Book 3700, Page 114, Register's Office for said County, to which plan reference is hereby made for a more complete description.

Being the same property conveyed to Larry N. Fullam by deed from Gene E. Tidwell and wife, Bobbie J. Tidwell, dated March 16, 1971, recorded March 18, 1971, of record in Book 4487, Page 12, Register's Office for Davidson County, Tennessee.

Further being the same property conveyed to Vincent Fuqua, Trustee by Quitclaim Deed from Larry N. Fullam, and further conveyed to Larry N. Fullam and wife, Diane J. Fullam by Quitclaim Deed from Vincent Fuqua, Trustee, dated December 21, 1973, recorded January 2, 1974, of record in Book 4777, Page 540, Register's Office for Davidson County, Tennessee.

Larry Fullam having since died on January 30, 2015.

This conveyance is subject to all easements, restrictive covenants and conditions, and other matters of record, including all items set out on any applicable plat of record.

This property is improved property known as 1252 Shawnee Road, Madison, TN 37115.

To have and to hold the said tract or parcel of land, with the appurtenances, estate, title and interest thereto belonging to the said Grantees, their heirs, successors and assigns, forever. Grantors covenant with Grantees that Grantors are lawfully seised and possessed of said land in fee simple, have a good right to convey it, and the same is unencumbered, unless otherwise herein set out. Grantors do further covenant and bind ourselves, our heirs, successors, assigns and representatives, to warrant and forever defend the title to said land to said Grantees, their heirs and assigns, against the lawful claims of all persons whomsoever.

X

Wherever used, the singular number shall include the plural, the plural the singular, and the use of any gender shall be applicable to all genders.

WITNESS my hand this 30th day of June, 2015.

X Diane J. Fullam

Diane J. Fullam

STATE OF Tennessee
COUNTY OF Sumner

Personally appeared before me, the undersigned, a Notary Public in and for said county and state, **Diane J. Fullam**, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged they executed the within instrument for the purposes therein contained.

Witness my hand in Hendersonville, TN, this 30th day of June, 2015.

X

Notary Public

HUTCH HENDERSON
STATE OF TENNESSEE NOTARY PUBLIC
RUTHERFORD COUNTY

My Commission expires: 4/17/16

Exhibit A

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

1. DECEDENT'S LEGAL NAME (First, Middle, Last, Suffix): Lilly Nell Fullam
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): January 30, 2015
4. TIME OF DEATH: 3:25 pm
5a. AGE-LAST BIRTHDAY (Years): 72
5b. IF UNDER 1 YEAR, AGE (Months)
5c. IF UNDER 24 HOURS, AGE (Hours)
6. DATE OF BIRTH (Month, Day, Year): July 19, 1942
7. BIRTHPLACE (State or Foreign Country): Lincolnton, NC
8. DEATH INJURED AT WORK?: No
9. DATE OF INJURY
10. TIME OF INJURY
11. PLACE OF INJURY
12. DEATH OCCURRED WHERE?: Other (Specify) In a Hospital
13. FACILITY NAME (If not institution, give street and number): Alive Hospice - Madison
14. CITY OR TOWN: Madison
15. COUNTY OF DEATH: Davidson
16. MARITAL STATUS: Married
17. SURVIVING SPOUSE (If wife, give maiden name): Diane Klein
18. USUAL OCCUPATION: Musician/Coach/Driver
19. KIND OF BUSINESS/INDUSTRY: Music
20. SOCIAL SECURITY NUMBER: 2637
21. RESIDENCE-STATE OR FOREIGN COUNTRY: Tennessee
22. COUNTY: Davidson
23. CITY OR TOWN: Madison
24. STREET AND NUMBER: 1252 Shawnee
25. INSIDE CITY LIMITS?: Yes
26. ZIP CODE: 37115
27. DECEDENT'S EDUCATION: 12th grade, no diploma
28. DECEDENT OF HISPANIC ORIGIN?: No
29. DECEDENT'S RACE: White
30. WAS DECEDENT EVER IN U.S. ARMED FORCES?: No
31. FATHER'S NAME (First, Middle, Last): Fred Fullam
32. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last): Bonnie Greenwood
33. INFORMANT'S NAME: Diane Fullam
34. RELATIONSHIP TO DECEDENT: Wife
35. MAILING ADDRESS (Street and Number, City, State, Zip Code): 1252 Shawnee, Madison, TN 37115
36. METHOD OF DISPOSITION: Burial
37. PLACE OF DISPOSITION: Nashville Funeral and Cremation
38. LOCATION (City or Town, State): Nashville, TN
39. SIGNATURE OF FUNERAL DIRECTOR: Christopher Taylor
40. LICENSE NUMBER: 4249
41. SIGNATURE OF EMBALMER
42. LICENSE NUMBER
43. NAME AND ADDRESS OF FUNERAL HOME: Nashville Funeral and Cremation Service 210 McMillan St, Nashville, TN 37203
44. LICENSE NUMBER OF FUNERAL HOME: 1136
45. REGISTRAR'S SIGNATURE
46. DATE FILED (Month, Day, Year)
47. CERTIFICATION OF DEATH: I, the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated.
PHYSICIAN (To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated.)
MEDICAL EXAMINER - On view to or examination, or investigation, death occurred at the time, date, and place, and due to the cause(s) and manner stated.
48. SIGNATURE OF CERTIFIER
49. LICENSE NUMBER
50. DATE SIGNED (Month, Day, Year)
51. NAME AND ADDRESS OF PERSON PRONOUNCING AND/OR CERTIFYING
52. TIME OF DEATH
53. DATE PRONOUNCED DEAD (Month, Day, Year)
54. PART I: Enter the chain of events--diseases, injuries, or complications--that directly caused the death. DO NOT enter terminal events such as cardiac arrest or respiratory arrest. If unknown, state so. Enter only one cause on a line.
IMMEDIATE CAUSE: Pancreatic Cancer
Due to (or as a consequence of):
UNDERLYING CAUSE
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.
55. WAS AN AUTOPSY PERFORMED?: No
56. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?: No
57. MANNER OF DEATH: Natural
58. DID TOBACCO USE CONTRIBUTE TO DEATH?: No
59. IF FEMALE: Not pregnant within past year
60. TRANSPORTATION: Driver/Operator
61. DATE OF INJURY
62. TIME OF INJURY
63. INJURY AT WORK?: No
64. PLACE OF INJURY (Street, Apartment No., City, State, Zip Code)
65. DESCRIBE HOW INJURY Ooccurred
66. LOCATION OF INJURY (Street and Number, City or Town, State)

I hereby certify the above to be a true and correct representation of the record or document on file in this department. This certified copy is valid only when printed on security paper, showing the reclamation bossed seal of the Tennessee Department of Health. Alteration or erasure voids this certification. Reproduction of this document is prohibited.

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

7682446

R. Benton McDonough, MD
STATE REGISTRAR

John J. Dreyzehner, MD, MPH, FACOEM
COMMISSIONER

Date Issued

CERTIFICATION OF VITAL RECORD

CERTIFIED FOR REMOTE FILING:

I, Michael J. Mills, do hereby make oath that I am a licensed attorney and/or the custodian of the electronic version of the attached document tendered for registration herewith and that this is a true and correct copy of the original document executed and authenticated according to law.

Michael J. Mills, attorney at law

State of Tennessee:
County of Williamson

Before me, the undersigned, a Notary Public of the State and County aforesaid, personally appeared Michael J. Mills, with whom I am personally acquainted, (or proved to me on the basis of satisfactory evidence) and who, upon oath, acknowledged himself/herself to be the named person, and that he/she executed the foregoing instrument for the purposes therein contained.

Notary Public James C. Smith
My Commission Expires: February 25, 2019

