This instrument prepared by:
LAW OFFICE OF TONI WAYNICK RUTGERSON
200 Nashboro Blvd
P.O. Box 17116
Nashville, TN 37217
(615) 885-5707

Karen Y Johnson Davidson County
Batch# 143958 DEEDQC
09/21/2018 02:25:30 PM 4 pgs
Fees: $22.00 Taxes: $0.00
20180921-0093898

ADDRESS OF NEW OWNER:	SEND TAX BILL TO:	MAP & PARCEL:
Cheryl Lynn Odum, Trustee **4618 Hessey Road** **Mt. Juliet, TN 37122**	**To New Owner**	**110 00 0 126.00**

THIS INSTRUMENT PREPARED BY INFORMATION FURNISHED SOLELY BY THE PARTIES HERETO WITH NO TITLE SEARCH PERFORMED.

QUITCLAIM DEED

KNOW ALL MEN BY THESE PRESENTS that for estate planning purposes and no monetary consideration, **JEANELL C. ODUM (also known as "Bencie Jeanell Odum")** has bargained and sold, and do hereby remise, release and forever quitclaim unto **CHERYL LYNN ODUM, TRUSTEE, with full power to sell, mortgage, encumber or convey without the consent or joinder of any beneficiary,** and its assigns, a certain tract or parcel of land in Davidson County, State of Tennessee, as described below:

A tract of land in the 4th Civil District of Davidson County, Tennessee, described according to a survey by Raymond P. Smith Company, dated January 19, 1966, as follows:

BEGINNING at a point in the northerly margin of Alvin Sperry Road, said point being 299.6 feet westerly from the U.S. Government taking line intersection with said margin of said road and thence with said margin of said road N. 83 degrees, 30' W., 325.0 feet to a point; thence N. 2 degrees 10' E., 571.6 feet to a point; thence S. 83 degrees 30' E., 325.0 feet to a point; thence S. 2 degrees 10' E., 571.6 feet to a point at the beginning, and containing 4.2 acres more or less.

BEING the same property conveyed to Herbert E. Odum and wife, Jeanell C. Odum* by deed from Oscar R. Odum and wife, Mary E. Odum dated January 5, 1967 of record as Book 4091, Page 567 in the Register's Office for Davidson County, Tennessee. Herbert E. Odum, having since died as evidenced by his death certificate, attached hereto at Exhibit A, title vested solely in Jeanell C. Odum as surviving tenant by the entirety. Grantor executed a Power of Attorney in favor of Cheryl Lynn Odum, Attorney in Fact, of record as Instrument No. _____ 20180921009389 7____ in the Register's Office for Davidson County, Tennessee.

*Jeanell C. Odum is also known as Bencie Jeanell Odum

This is improved property known as:

4915 ALVIN SPERRY ROAD
MT. JULIET, TN 37122

Grantor makes no representation or warranty, express or implied, as to the exact amount of acreage or square footage in the property, or as to the ownership of the minerals located on, under or within the property. Grantor makes no representations or warranties, express or implied, with

respect to the condition of the property conveyed hereby, including improvements located thereon, including, without limitation, the habitability, condition or fitness thereof for any particular use or purpose. Grantee agrees that the property conveyed hereby, including improvements located thereon, is conveyed by Grantor and accepted by Grantee in an "as is, where is" and "with all faults" condition.

This conveyance is made expressly subject to all covenants, conditions, restrictions, and reservations contained in former deeds and other instruments of record applicable to said property, insofar as same are presently binding thereon, and to any easements apparent from an inspection of said property. 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.

This conveyance is further made subject to real property taxes for 2018 and subsequent years.

STATE OF TENNESSEE
COUNTY OF WILSON

The actual consideration or value, whichever is greater for this transfer is $0.00.

Affiant

Subscribed and sworn to before me this 20th day of September, 2018.

Notary Public

IN WITNESS WHEREOF I have hereunto set my hand on this the 20th day of September, 2018.

Attorney in Fact

JEANELL C. ODUM
By Cheryl Lynn Odum, Attorney In Fact

STATE OF TENNESSEE
COUNTY OF WILSON

Personally appeared before me, the undersigned, a Notary Public in and for said County and State, the within named Cheryl Lynn Odum, Attorney in Fact for Jeanell C. Odum, the Bargainor, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged that she has authority to execute said document on behalf of Jeanell C. Odum and that she executed the within Quitclaim Deed for the purposes therein contained.

Subscribed and sworn to before me this 20th day of September, 2018.

Notary Public

201809210093898

CERTIFICATION

I, Toni Rutgerson, do hereby make oath that I am 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.

TONI RUTGERSON

STATE OF TENNESSEE
COUNTY OF DAVIDSON

On this 20th day of September, 2018 personally appeared before me, Rebecca Waynick, a notary public for this county and state, Toni Rutgerson, who acknowledges that this certification of an electronic document is true and correct and whose signature I have witnessed.

REBECCA WAYNICK
My Commission Expires:

REBECCA R. WAYNICK
STATE OF TENNESSEE NOTARY PUBLIC
COUNTY OF WILSON
MY COMMISSION EXPIRES: JUNE 25, 2019

Exhibit A

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2018 039041

DECEDENT

1. DECEDENT'S LEGAL NAME: HERBERT EDWARD ODUM
2. SEX: MALE
3. DATE OF DEATH: 07/ /2018
4. TIME OF DEATH (Approx.): 04:10 PM
5a. AGE: 87
5b. UNDER 1 YEAR: Months / Days
5c. UNDER 1 DAY: Hours / Minutes
6. DATE OF BIRTH: 07/26/1930
7. BIRTHPLACE: DAYTON, OH
8a. PLACE OF DEATH: HOSPICE FACILITY
8b. FACILITY NAME: THE RESIDENCE/ALIVE HOSPICE
8c. CITY OR TOWN: NASHVILLE
8d. COUNTY OF DEATH: DAVIDSON
9. MARITAL STATUS: MARRIED
10. SURVIVING SPOUSE (name prior to first marriage): JEANELL CARDEN
11a. DECEDENT'S USUAL OCCUPATION: MASONARY CONTRACTOR
11b. KIND OF BUSINESS/INDUSTRY: CONSTRUCTION
12. SOCIAL SECURITY NUMBER: [redacted]
13a. RESIDENCE-STATE OR FOREIGN COUNTRY: TENNESSEE
13b. COUNTY: DAVIDSON
13c. CITY OR TOWN: MOUNT JULIET
13d. STREET AND NUMBER: 4915 ALVIN SPERRY RD
13e. INSIDE CITY LIMITS?: YES
13f. ZIP CODE: 37122
14. WAS DECEDENT EVER IN US ARMED FORCES?: YES
15. DECEDENT'S EDUCATION: 8TH GRADE OR LESS
16. DECEDENT OF HISPANIC ORIGIN?: NO, NOT SPANISH/HISPANIC/LATINO
17. DECEDENT'S RACE: WHITE

PARENTS

18. FATHER'S NAME: PERRY ODUM
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE: MARTHA LEONA HIX

20a. INFORMANT'S NAME: CHERYL LYNN ODUM
20b. RELATIONSHIP TO DECEDENT: DAUGHTER
20c. MAILING ADDRESS: 4618 HESSEY RD, MOUNT JULIET, TN 37122

DISPOSITION

21a. METHOD OF DISPOSITION: BURIAL
21b. PLACE OF DISPOSITION: HERMITAGE MEMORIAL GARDENS
21c. LOCATION: OLD HICKORY, TN
22a. SIGNATURE OF FUNERAL DIRECTOR: ▶ /s/ HERSCHEL DAVID BEGARLY
22b. LICENSE NUMBER: 5610
22c. SIGNATURE OF EMBALMER: ▶ /s/ Michelle Pelino-Givens
22d. LICENSE NUMBER: 4195
23a. NAME AND ADDRESS OF FUNERAL HOME: HERMITAGE FUNERAL HOME AND MEMORIAL GARDENS, 535 SHUTE LANE, OLD HICKORY, TN 37138
23b. LICENSE NUMBER: 546

REGISTRAR

24. REGISTRAR'S SIGNATURE: ▶ /s/ EDWARD C. BISHOP III
25. DATE FILED: 07/17/2018

CERTIFIER

PHYSICIAN OR MEDICAL EXAMINER FACILITING CAUSE OF DEATH MUST COMPLETE AND SIGN WITHIN 48 HOURS

26. CERTIFIER
26a. ☒ PHYSICIAN – TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE DATE, TIME AND PLACE, AND DUE TO THE CAUSE(S) AND MANNER STATED.
26b. ☐ MEDICAL EXAMINER – ON THE BASIS OF EXAMINATION, AND/OR INVESTIGATION, IN MY OPINION, DEATH OCCURRED AT THE DATE, TIME, AND PLACE, AND DUE TO THE CAUSE(S) AND MANNER STATED.
27a. CERTIFIER: ▶ /s/ ROBERT J BERKOMPAS
27b. LICENSE NUMBER: 017891
27c. DATE SIGNED: 07/16/2018
27d. NAME AND ADDRESS: ROBERT J BERKOMPAS, 1718 PATTERSON STREET, NASHVILLE, TN 37203

MEDICAL CERTIFICATION

28. PART I. ENTER THE CHAIN OF EVENTS (DISEASES, INJURIES, OR COMPLICATIONS) THAT DIRECTLY CAUSE THE DEATH. DO NOT ENTER TERMINAL EVENTS SUCH AS CARDIAC ARREST, RESPIRATORY ARREST, OR VENTRICULAR FIBRILLATION WITHOUT SHOWING THE ETIOLOGY. ENTER ONLY ONE CAUSE ON A LINE.

IMMEDIATE CAUSE (Final disease or condition resulting in death): [redacted]
Sequentially list conditions, if any, leading to the immediate cause. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST.

APPROXIMATE INTERVAL: ONSET TO DEATH

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I

29a. WAS AN AUTOPSY PERFORMED?: NO
29b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?

30. MANNER OF DEATH: NATURAL
31. DID TOBACCO USE CONTRIBUTE TO DEATH?: UNKNOWN
32. IF FEMALE: N/A
33. IF TRANSPORTATION INJURY, SPECIFY:
34a. DATE OF INJURY:
34b. TIME OF INJURY:
34c. INJURY AT WORK?:
34d. PLACE OF INJURY:
34e. DESCRIBE HOW INJURY OCCURRED:
34f. LOCATION OF INJURY:

TH-3658 (Rev. 8/2017) RDA 10172

10190880

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 red embossed 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

Edward C. Bishop III
State Registrar

John J. Dreyzehner, MD, MPH, FACOEM
COMMISSIONER

1 0 1 9 0 8 8 0

Date Issued: JUL 18 2018

CERTIFICATION OF VITAL RECORD

201809210093898