Prepared By:
Wynn Davenport Mancini

After Recording Return To:
7109 Trillium Court
Owens Cross Roads, Alabama 35763

Karen Johnson Davidson County
Batch# 285417 DEEDQC
09/13/2019 02:10:28 PM 5 pgs
Fees: $27.00 Taxes: $0.00

20190913-0093085

QUITCLAIM DEED

On September 10th, 2019 THE GRANTOR(S),

- Clara Rawlings Davenport, a single person,

for and in consideration of: One Dollar ($1.00) and/or other good and valuable consideration, including the love and affection which I have for my daughter, conveys, releases and quitclaims to the GRANTEE(S):

- Wynn Davenport Mancini and Richard Albert Mancini, a married couple, residing at 7109 Trillium Court, Owens Cross roads, Madison County, Alabama 35763

the following described real estate, situated in Joelton, in the County of Davidson, State of Tennessee

Legal Description: See attached *Exhibit A*

Grantor does hereby convey release and quitclaim all of the Grantor's rights, title, and interest in and to the above described property and premises to the Grantee(s), and to the Grantee(s) heirs and assigns forever, so that neither Grantor(s) nor the Grantor's heirs, legal representatives or assigns shall have, claim or demand any right or title to the property, premises, or appurtenances, or any part thereof.

Tax Parcel Number: M21- 150

Mail Tax Statements To:
Wynn Davenport Mancini
7109 Trillium Court
Owens Cross Roads, Alabama 35763

[SIGNATURE PAGE FOLLOWS]

Grantor Signatures:

DATED: 9/10/19

Clara Rawlings Davenport

Clara Rawlings Davenport
5397 Rawlings Rd
Joelton, Tennessee, 37080

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

On this 10th day of September, 2019, before me personally appeared Clara Rawlings Davenport, to me known to be the persons described in and who executed the foregoing instrument, and acknowledged that they executed same as their free act and deed.

DEANDRE ANDREWS
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
My Commission Expires Mar. 7, 2023

Notary Public

Financial Relationship Consultant
Title (and Rank)

My commission expires 3-7-2023

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

I, Affiant, hereby swear or affirm that to the best of my knowledge, information, and belief the actual consideration for this transfer is $1.00.

Affiant
Affiant's Name: Robert Marks

STATE OF TENNESSEE
COUNTY OF DAVIDSON
The actual consideration or true value, whichever is greater for this transfer is
$ 1.00 **, Affiant**
Subscribed and sworn before me this the
13 **Day of** September **, 2019.**
Bandi Weir **, Deputy Register**

EXHIBIT A: LEGAL DESCRIPTION OF PROPERTY

NELSON E. DAVENPORT

CLARA RAWLINGS DAVENPORT

5.46 ACRES

RAWLINGS ROAD

BEING A TRACT OF LAND AS SHOWN ON PROPERTY MAP 21, ASSESSOR'S OFFICE, AND LYING WHOLLY WITHIN THE 1st COUNCILMANIC DISTRICT OF DAVIDSON COUNTY, METROPOLITAN NASHVILLE, TENNESSEE. BOUNDED IN GENERAL BY RAWLINGS ROAD ON THE EAST; NELSON E. DAVENPORT'S 5.17 ACRE TRACT AND ON THE SOUTH; LITTLE MARROWBONE LAKE ON THE WEST; AND NELSON E. DAVENPORT'S 19.25 ACRE TRACT ON THE NORTH, MORE PARTCULARLY DESCRIBED AS FOLLOWS:

COMMENCING AT AN IRON PIN SET [N 720490.07 E 1702013.41] ON THE WEST SIDE OF RAWLINGS ROAD (25' FROM THE CENTER), IN THE SOUTH LINE OF PHILA R. HACH (REF. DEED BOOK 5237 PAGE 938 R.O.D.C. – PROPERTY MAP 21 PARCEL 150); THENCE S19°56'55"E 69.80' TO AN IRON PIN SET, THE TRUE POINT OF BEGINNING OF THE FOLLOWING DESCRIBED TRACT:

THENCE WITH THE SOUTH LINE OF NELSON E DAVENPORT'S 19.25 ACRE TRACT N70°20'44"E 25.41' TO A POINT IN THE CENTER OF RAWLINGS ROAD; THENCE WITH THE CENTER OF RAWLINGS ROAD S32°08'19"E 92.14' TO A POINT; THENCE WITH A CURVE TO THE RIGHT HAVING THE FOLLOWING CHARACTERISTICS:

DELTA = 41°48'20"; RADIUS = 191.97'; ARC = 140.07'; CHORD = S14°17'31"E 136.98' TO A POINT; THENCE WITH A CURVE TO THE RIGHT HAVING THE FOLLOWING CHARACTERISTICS:

DELTA = 28°43'30"; RADIUS = 312.30'; ARC = 156.57'; CHORD = S26°55'40"W 154.94' TO A POINT; THENCE WITH A CURVE TO THE RIGHT HAVING THE FOLLOWING CHARACTERISTICS:

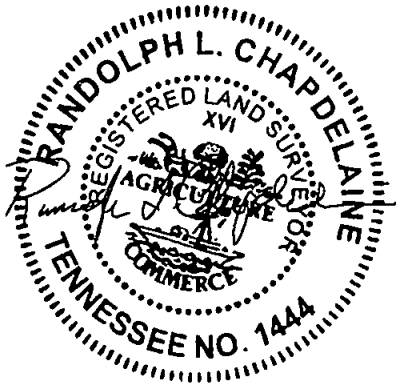
DELTA = 20°35'41"; RADIUS = 388.92'; ARC = 139.80'; CHORD = S50°34'16"W 139.04' TO A POINT; THENCE WITH A CURVE TO THE RIGHT HAVING THE FOLLOWING CHARACTERISTICS:

DELTA = 03°10'01"; RADIUS = 2713.05'; ARC = 149.96'; CHORD = S61°04'33"W 149.94' TO A POINT; THENCE WITH A CURVE TO THE RIGHT HAVING THE FOLLOWING CHARACTERISTCS:

DELTA = 08°14'25"; RADIUS = 454.58'; ARC = 65.38'; CHORD = S64°48'48"W 65.32' TO A POINT, THE NORTHEAST CORNER OF NELSON E. DAVENPORT'S 5.17 ACRE TRACT; THENCE LEAVING RAWLINGS ROAD AND WITH DAVENPORT'S 5.17 ACRE TRACT N55°46'40"W, PASSING A WITNESS IRON PIN AT 30.84', IN ALL 418.22' TO AN EXISTING BROKEN IRON STAKE ON THE EAST SIDE OF LITTLE MARROWBONE LAKE; THENCE WITH THE EAST SIDE OF LITTLE MARROWBONE LAKE N30°58'20"E 229.18' TO AN IRON PIN SET IN THE SOUTH LINE OF THE AFOREMENTIONED 19.25 ACRE TRACT; THENCE WITH SAID 19.25 ACRE TRACT N83°18'10"E 325.03' TO AN IRON PIN SET; THENCE N70°20'44"E 176.49' TO THE TRUE POINT OF BEGINNING, CONTAINING 5.46 ACRES, MORE OR LESS, AND BEING A PORTION OF THE NELSON E. DAVENPORT AND CLARA RAWLINGS DAVENPORT PROPERTY AS RECORDED IN DEED BOOK 4943 PAGE 439, REGISTER'S OFFICE, ACCORDING TO A SURVEY BY RANDOLPH L. CHAPDELAINE R.L.S. 1444, 7376 WALKER ROAD, FAIRVIEW, TENNESSEE 37062, AND DATED JUNE 28, 2019.

BEING A PORTION OF THE SAME PROPERTY CONVEYED TO NELSON E. DAVENPORT AND CLARA RAWLINGS DAVENPORT FROM A. L. RAWLINGS AND SOPHIA SHADOW RAWLINGS, DATED AUGUST 19, 1975 AND RECORDED AUGUST 19, 1975 IN DEED BOOK 4943, PAGE 439, REGISTER'S OFFICE FOR DAVIDSON COUNTY, METROPOLITAN NASHVILLE, TENNESSEE.

THE ABOVE TRACT IS SUBJECT TO ALL EASEMENTS, RESTRICTIONS, COVENANTS OF RECORD, AND TO THE FINDINGS OF A TITLE REPORT.



STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER

1. DECEDENT'S LEGAL NAME (First, Middle, Last, Suffix): Nelson Edwin Davenport, Jr.
2. SEX: Male
3. DATE OF DEATH (Month, Day, Year): April 7, 2015
4. TIME OF DEATH (Approx.): 08:45 AM
5a. AGE-Last Birthday (Years): 90
5b. UNDER 1 YEAR: Months / Days
5c. UNDER 1 DAY: Hours / Minutes
6. DATE OF BIRTH (Month, Day, Year): June 23, 1924
7. BIRTHPLACE (City and State or Foreign Country): Jourdanton, Texas

8a. PLACE OF DEATH (Check only one)
IF DEATH OCCURRED IN A HOSPITAL: ☐ Inpatient ☐ ER/Outpatient ☐ DOA
IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL: ☐ Hospice facility ☐ Nursing Home/Long term care facility ☒ Decedent's home ☐ Other residence ☐ Other (Specify)

8b. FACILITY NAME (If not institution, give street and number): 5397 Rawlings Road
8c. CITY OR TOWN: Joelton
8d. COUNTY OF DEATH: Davidson

9. MARITAL STATUS: ☒ Married ☐ Married, but separated ☐ Widowed ☐ Divorced ☐ Never married ☐ Unknown
10. SURVIVING SPOUSE (If wife, give name prior to first marriage): Clara Rawlinge
11a. DECEDENT'S USUAL OCCUPATION: Vice President
11b. KIND OF BUSINESS/INDUSTRY: Rockwell Mfg. Co Chemical Engineering
12. SOCIAL SECURITY NUMBER: -9955
13a. RESIDENCE-STATE OR FOREIGN COUNTRY: TN
13b. COUNTY: Davidson
13c. CITY OR TOWN: Joelton
13d. STREET AND NUMBER: 5397 Rawlings Road
13e. INSIDE CITY LIMITS: ☒ Yes ☐ No
13f. ZIP CODE: 37080
14. WAS DECEDENT EVER IN US ARMED FORCES? ☒ Yes ☐ No

15. DECEDENT'S EDUCATION (Check the box that best describes the highest degree or level of school completed at the time of death)
☐ 8th grade or less
☐ 9th-12th grade; no diploma
☐ High school graduate or GED completed
☐ Some college credit but no degree
☐ Associates degree (e.g., AA, AS)
☒ Bachelor's Degree (e.g., BA, AB, BS)
☐ Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA)
☐ Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LLB, JD)
☐ Unknown

16. DECEDENT OF HISPANIC ORIGIN? (Check the box that best describes whether the decedent is Spanish/Hispanic/Latino. Check the "No" box if decedent is not Spanish/Hispanic/Latino.)
☒ No, not Spanish/Hispanic/Latino
☐ Yes, Mexican, Mexican American, Chicano
☐ Yes, Puerto Rican
☐ Yes, Cuban
☐ Yes, other Spanish/Hispanic/Latino
(Specify) _____
☐ Unknown

20. DECEDENT'S RACE (Check one or more races to indicate what the decedent considered himself or herself to be)
☒ White
☐ Black or African American
☐ American Indian or Alaska Native (Name of the enrolled or principal tribe) _____
☐ Asian Indian
☐ Chinese
☐ Filipino
☐ Japanese
☐ Korean
☐ Vietnamese
☐ Other Asian (Specify) _____
☐ Native Hawaiian
☐ Guamanian or Chamorro
☐ Samoan
☐ Other Pacific Islander (Specify) _____
☐ Other (Specify) _____
☐ Unknown

18. FATHER'S NAME (First, Middle, Last): Nelson Edwin Davenport, Sr.
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last): Daisy Benge

20a. INFORMANT'S NAME: Clara Davenport
20b. RELATIONSHIP TO DECEDENT: Spouse
20c. MAILING ADDRESS (Street and Number, City, State, Zip Code): 5397 Rawlings Road, Joelton, TN 37080

21a. METHOD OF DISPOSITION: ☒ Burial ☐ Cremation ☐ Donation ☐ Entombment ☐ Removal from State ☐ Other (Specify) _____
21b. PLACE OF DISPOSITION (Name of cemetery, crematory, other place): Mount Olivet Cemetery
21c. Location - City or Town and State: Nashville, TN

22a. SIGNATURE OF FUNERAL DIRECTOR: Bobby Wayne Cook
22b. LICENSE NUMBER: 6870
22c. SIGNATURE OF EMBALMER: Jim Brewer
22d. LICENSE NUMBER: 2969

23a. NAME AND ADDRESS OF FUNERAL HOME: Anderson & Garrett Funeral Home, P.O. Box 68, 3501 Old Clarksville Pike, Joelton, TN 37080
23b. LICENSE NUMBER OF FUNERAL HOME: 193

24. REGISTRAR'S SIGNATURE: Deah Rhoads (DR)
25. DATE FILED (Month, Day, Year): April 8, 2015

26. CERTIFIER (Check only one)
☒ 26a. PHYSICIAN - To the best of my knowledge, death occurred at the date 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, and place, and due to the cause(s) and manner stated.

27a. SIGNATURE OF CERTIFIER: MD
27b. LICENSE NUMBER: 38283
27c. DATE SIGNED (Month, Day, Year): 4-14-15
27d. NAME AND ADDRESS: Shazia Fazili, M.D. 1718 Patterson Street, Nashville, TN 37203

28. 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, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on each line.
IMMEDIATE CAUSE (Final disease or condition resulting in death): a. Alzheimer's dementia — Due to (or as a consequence of): _____ — Approximate Interval: Onset to death: Unknown
Sequentially list conditions, if any, leading to the cause listed on line a. Enter the 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): _____
d. _____

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

29a. WAS AN AUTOPSY PERFORMED? ☐ Yes ☒ No
29b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? ☐ Yes ☐ No

30. MANNER OF DEATH: ☒ Natural ☐ Homicide ☐ Accident ☐ Pending Investigation ☐ Suicide ☐ Could not be determined
31. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☒ No ☐ Unknown
32. IF FEMALE: ☐ Not pregnant within past year ☐ Pregnant at time of death ☐ Not pregnant, but pregnant within 42 days of death ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Unknown if pregnant within the past year

33. IF TRANSPORTATION INJURY, SPECIFY: ☐ Driver/Operator ☐ Passenger ☐ Pedestrian ☐ Other (Specify) _____
34a. DATE OF INJURY (Month, Day, Year)
34b. TIME OF INJURY
34c. INJURY AT WORK? ☐ Yes ☐ No
34d. PLACE OF INJURY - at home, farm, street, factory, office, building, etc. (Specify)
34e. DESCRIBE HOW INJURY OCCURRED
34f. LOCATION OF INJURY (Street and Number, City or Town, State)

PH-1659 (Rev. 9/2011) RDA 1399

7683846

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.

R. Benton McDonough, JD
STATE REGISTRAR

John J. Dreyzehner, MD, MPH, FACOEM
COMMISSIONER

7683846 4/22/2015
Date Issued

CERTIFICATION OF VITAL RECORD