Karen Johnson Davidson County
Batch# 666053 DEEDQC
06/28/2021 08:34:39 AM 4 pgs
Fees: $22.00 Taxes: $0.00
20210628-0086877

This Instrument Prepared By:
BONE MCALLESTER NORTON PLLC
100 Bluegrass Commons Blvd, Suite 2370
Hendersonville, Tennessee 37075
615.822.8822

QUITCLAIM DEED

Address New Owner(s)	Send Tax Bills To:	Map & Parcel Nos.:
Paula A. Rhea 115 Millbrook Road Hendersonville, TN 37075	Same	Map: 69-4 Parcel: 122

FOR AND IN CONSIDERATION of other monetary consideration, I, Paul A. Rhea, as the surviving spouse of Mack R. Rhea (death certificate attached as Exhibit A), (the "Grantor"), do hereby quitclaim, transfer and convey all my interest in and to the following described property to Paula A. Rhea (the "Grantee"), said property being a certain tract or parcel of land in the County of Sumner, State of Tennessee, and more particularly described in Exhibit B.

BEING the same property conveyed to Mack Rhea and wife, Paula Rhea, by Warranty Deed, Instrument No. 20040130-0011784, Register's Office for Davidson County, Tennessee from Leland D. Watts, married.

The subject property is commonly known as 144 Haynes Park Dr., Nashville, Tennessee, 37218

The above legal description is the same as that contained in the previous deed of records.

Subject to any and all plats, easements, restrictions, and other matters of records.

This transfer is by quitclaim and we make no warranties about the title. This deed is prepared on information provided by the Grantor and no examination has been made by the Preparer.

Property is subject to liens and encumbrances of record.

IN TESTIMONY WHEREOF, Grantors have executed this deed on the 25th day of June, 2021.

Paula A. Rhea
PAULA A. RHEA

STATE OF TENNESSEE)
COUNTY OF SUMNER)

Before me, Christina Baker, a Notary Public in and for said County and State, aforesaid, personally appeared Paul A. Rhea, the within named bargainor, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged that he executed the within instrument for the purposes therein contained.

WITNESS my hand and seal, at the office in Hendersonville, Sumner County, Tennessee, this 25th day of June, 2021.

Christina Baker
NOTARY PUBLIC

My Commission Expires: 7/24/24

CHRISTINA BAKER STATE OF TENNESSEE NOTARY PUBLIC SUMNER COUNTY

STATE OF TENNESSEE)
COUNTY OF SUMNER)

The actual consideration for this transfer of property is $-0-.

Paula A. Rhea
Affiant

Sworn to and subscribed before me
This 25 day of June, 2021.

Christina Baker
Notary Public

My Commission Expires: 7/24/24

CHRISTINA BAKER STATE OF TENNESSEE NOTARY PUBLIC SUMNER COUNTY

EXHIBIT
tabbies
A

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2018 068888

DECEDENT (TYPE/PRINT IN PERMANENT BLACK INK)

1. DECEDENT'S LEGAL NAME (NAME OF DECEDENT - first, middle, last, suffix) MACK ROBERT RHEA						2. SEX MALE	3. DATE OF DEATH 12/09/2018
4. TIME OF DEATH (Approx.) 17:06	5a. AGE 75	5b. UNDER 1 YEAR Months	Days	5c. UNDER 1 DAY Hours	Minutes	6. DATE OF BIRTH 07/16/1943	7. BIRTHPLACE BIRMINGHAM, AL
8a. PLACE OF DEATH ER/OUTPATIENT							
8b. FACILITY NAME HENDERSONVILLE MEDICAL CENTER			8c. CITY OR TOWN HENDERSONVILLE				8d. COUNTY OF DEATH SUMNER
9. MARITAL STATUS MARRIED	10. SURVIVING SPOUSE (name prior to first marriage) PAULA DELFFS		11a. DECEDENT'S USUAL OCCUPATION ASSISTANT COMMISSIONER				11b. KIND OF BUSINESS/INDUSTRY DEPARTMENT OF MENTAL
12. SOCIAL SECURITY NUMBER 1600	13a. RESIDENCE-STATE OR FOREIGN COUNTRY TENNESSEE		13b. COUNTY SUMNER				13c. CITY OR TOWN HENDERSONVILLE
13d. STREET AND NUMBER 115 MILLBROOK ROAD		13e. INSIDE CITY LIMITS? YES	13f. ZIP CODE 37075				14. WAS DECEDENT EVER IN US ARMED FORCES? YES
15. DECEDENT'S EDUCATION MASTER'S DEGREE	16. DECEDENT OF HISPANIC ORIGIN? NO, NOT SPANISH/HISPANIC/LATINO		17. DECEDENT'S RACE WHITE				

PARENTS

18. FATHER'S NAME HENRY MOFFETT RHEA	19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE LAURA MAI MCGOWAN

20a. INFORMANT'S NAME PAULA RHEA	20b. RELATIONSHIP TO DECEDENT WIFE	20c. MAILING ADDRESS 115 MILLBROOK ROAD, HENDERSONVILLE, TN 37075

DISPOSITION

21a. METHOD OF DISPOSITION BURIAL	21b. PLACE OF DISPOSITION HENDERSONVILLE MEMORY GARDENS	21c. LOCATION SUMNER, TN

22a. SIGNATURE OF FUNERAL DIRECTOR ▶ /e/ STEPHANIE MARIE WINKLE-MILLER	22b. LICENSE NUMBER 6901	22c. SIGNATURE OF EMBALMER ▶ /e/ JAMES C. GAY	22d. LICENSE NUMBER 20099
23a. NAME AND ADDRESS OF FUNERAL HOME HENDERSONVILLE MEMORY GARDENS, FUNERAL HOME, 353 EAST MAIN STREET, HENDERSONVILLE, TN 37075-2545			23b. LICENSE NUMBER 1127

REGISTRAR

24. REGISTRAR'S SIGNATURE ▶ /e/ EDWARD G. BISHOP III	25. DATE FILED 12/13/2018

CERTIFIER

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.

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

27a. CERTIFIER ▶ /e/ LOUIS C JOHNSON	27b. LICENSE NUMBER 023577	27c. DATE SIGNED 12/11/2018
27d. NAME AND ADDRESS LOUIS C JOHNSON 2400 PATTERSON SUITE 400, NASHVILLE, TN 37203		

MEDICAL CERTIFICATION

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. ENTER ONLY ONE CAUSE ON A LINE.

		APPROXIMATE INTERVAL: ONSET TO DEATH
IMMEDIATE CAUSE (Final disease or condition resulting in death) →	a. VENTRICULAR FIBRILLATION	SECONDS
	DUE TO (OR A CONSEQUENCE OF)	
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. ACUTE MYOCARDIAL INFARCTION	SECONDS
	DUE TO (OR A CONSEQUENCE OF)	
	c. CORANARY ARTERY DISEASE	YEARS
	DUE TO (OR A CONSEQUENCE OF)	
	d.	

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I: HYPERTENSION, HYPERLIPIDEMIA, CHRONIC ATRIAL FIBRILLATION	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? NO	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	

PH-1659 (Rev. 8/2017) RDA 10112

10542969

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.

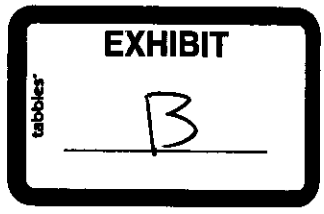
Tennessee Code Annotated 68-3-101 et seq., Vital Records Act of 1977.

Edward G. Bishop III
State Registrar

John J. Dreyzehner, MD, MPH, FACOEM
COMMISSIONER

10542969
Date Issued DEC 14 2018

CERTIFICATION OF VITAL RECORD



BEING Lot No. 14, on the Plan of Section 2, Haynes Park Subdivision, of record in Plat Book 4460, Page 51, Register's Office for Davidson County, TN, to which plat reference is hereby made for a more complete description.