THIS INSTRUMENT PREPARED BY:
J. B. (JACK) FREEDLE
Attorney at Law
103 Main Street
Portland, Tennessee 37148
(615) 325-2508

Karen Johnson Davidson County
Batch# 896950 DEEDQC
08/01/2022 12:42:27 PM 3 pgs
Fees: $17.00 Taxes: $0.00
20220801-0087262

Send tax bills to: owner
Tanya Brewer, Trustee
Marie Weatherly Living Trust
441 Gates Road
Goodlettsville, TN 37072

Map: 33-12, Parcel 15

QUITCLAIM DEED

FOR AND IN CONSIDERATION OF the sum of ten dollars ($10.00), cash in hand paid, and other good and valuable consideration, the receipt of which is hereby acknowledged, MARIE ANN WEATHERLY, hereinafter called the Grantor, does hereby transfer, convey, and quitclaim unto, TANYA BREWER, as Trustee of the Marie Weatherly Irrevocable Income Only Trust dated July 18, 2022, to hold the said property pursuant to the terms of said Trust, land described as follows:

> Being Lot No. 78 on the Plan of Gatewood Subdivision, Section I, as of record in Book 3300, pages 47 to 52, both inclusive, Register's Office for said County.
>
> Said Lot No. 78 fronts 80 feet on the westerly side of Gates Road, and extends back between parallel lines, 186 feet to a dead line.
>
> Being the same property conveyed to George S. Weatherly and wife, Marie A. Weatherly, by Warranty Deed dated January 6, 1967, of record at 4091, Page 779, Register's Office for Davidson County.

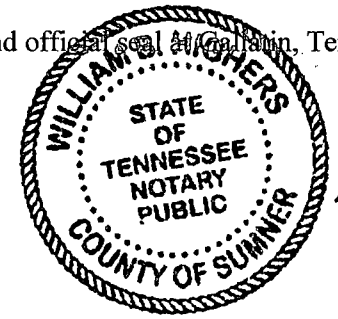
WITNESS my hand this 18 day of July, 2022.

Marie Ann Weatherly
MARIE ANN WEATHERLY

STATE OF TENNESSEE
COUNTY OF SUMNER

Personally appeared before me, the undersigned, a Notary Public in and for the said County and State, the within named Marie Ann Weatherly, with whom I am personally acquainted, and who acknowledged that she executed the foregoing instrument for the purposes therein contained as her free act and deed.

Witness my hand and official seal at Gallatin, Tennessee, on this, the 18 day of July, 2022.



NOTARY PUBLIC
My commission expires: 01/29/2025

STATE OF TENNESSEE
COUNTY OF SUMNER

I hereby swear that the actual consideration or value of this transfer is $0.00.

Marie Ann Weatherly
MARIE ANN WEATERLY

Sworn to and subscribed before me this 18th day of July, 2022.



NOTARY PUBLIC
My commission expires: 01/29/2025

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2022 044432

1. Decedent's Legal Name			2. Sex	3. Date of Death
GEORGE STEVEN WEATHERLY			MALE	06/28/2022
4. Time of Death (Approx.)	**5a. Age**	**6. Date of Birth**	**7. Birthplace**	
20:10	78	08/03/1943	MILAN, TN	
8a. Place of Death				
INPATIENT				
8b. Facility Name		**8c. City or Town**	**8d. County of Death**	
SKYLINE MEDICAL CENTER		NASHVILLE	DAVIDSON	
9. Marital Status	**10. Surviving Spouse (name prior to first marriage)**	**11a. Decedent's Usual Occupation**	**11b. Kind of Business/Industry**	
MARRIED	MARIE CLARK	MACHINIST	CHEMICAL MANUFACTURING	
12. Social Security Number	**13a. Residence-State or Foreign Country**	**13b. County**	**13c. City or Town**	
-9561	TENNESSEE	DAVIDSON	GOODLETTSVILLE	
13d. Street and Number	**13e. Inside City Limits?**	**13f. Zip Code**	**14. Was Decedent ever in US Armed Forces?**	
441 GATES ROAD	YES	37072	NO	
15. Decedent's Education	**16. Decedent of Hispanic Origin?**	**17. Decedent's Race**		
SOME COLLEGE CREDIT, BUT NO DEGREE	NO, NOT SPANISH/HISPANIC/LATINO	WHITE		
18. Father's Name		**19. Mother's Name Prior to First Marriage**		
WALLACE BURTON WEATHERLY		LILLIAN GERTRUDE KING		
20a. Informant's Name	**20b. Relationship to Decedent**	**20c. Mailing Address**		
TANYA BREWER	DAUGHTER	9 WELCOME LANE, HENDERSONVILLE, TN 37075		
21a. Method of Disposition	**21b. Place of Disposition**	**21c. Location**		
CREMATION	MUSIC CITY CREMATORY	NASHVILLE, TN		
22a. Signature of Funeral Director	**22b. License Number**	**22c. Signature of Embalmer**	**22d. License Number**	
▶ /e/ LAUREN ELIZABETH GRIFFIN-ROACH	20220	▶		
23a. Name and Address of Funeral Home			**23b. License Number**	
SPRING HILL FUNERAL HOME AND CEMETERY, 5110 GALLATIN PIKE, NASHVILLE, TN 37216			1046	
24. Registrar's Signature		**25. Date Filed**		
▶ /e/ EDWARD G BISHOP III		07/07/2022		

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	27b. License Number	27c. Date Signed
▶ /e/ BARRETT DOW CONNER	028554	07/06/2022

27d. Name and Address
BARRETT DOW CONNER 3443 DICKERSON PIKE SUITE 680, NASHVILLE, TN 37207

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). 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	a. PNEUMONIA	8 DAYS
	b. COVID 19 INFECTION	
	c.	
	d.	

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

CONGESTIVE HEART FAILURE; ATRIAL FIBRILLATION; CHRONIC OBSTRUCTIVE PULMONARY DISEASE; DIABETES MELLITUS; END STAGE RENAL DISEASE

29a. Was an Autopsy Performed?	29b. Were Autopsy Findings Available to Complete the Cause of Death?
NO	

30. Manner of Death	31. Did Tobacco Use Contribute to Death?	32. If Female:
NATURAL	UNKNOWN	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-1659E RDA 10112

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.

14091449

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

Edward G. Bishop III
State Registrar

1 4 0 9 1 4 4 9
Date Issued: Jul 08 2022

THE GREAT SEAL OF THE STATE OF TENNESSEE XVI AGRICULTURE COMMERCE 1796

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD