RECORDING INFORMATION	PREPARED BY AND RETURN TO:
Karen Johnson Davidson County Batch# 1077577 AFFIDAVIT 12/04/2023 08:25:30 AM 2 pgs Fees: $12.00 Taxes: $0.00 20231204-0093050	Valerie Webb & Associates PLLC 3037 Highway 31W P.O. Box 887 White House, TN 37188

SCRIVENER'S AFFIDAVIT

STATE OF TENNESSEE)
COUNTY OF ROBERTSON)

I, Lisa Hodges, being duly sworn, make oath as follows:

1. I am an employee of Valerie Webb & Associates PLLC, a Tennessee professional limited liability company.

2. In my role as an employee of said company, I notarized the following instrument:

A General Warranty Deed from Charles Louis Donnelly to Paul Vergara, dated 11/01/2023 and recorded on 11/03/2023 as Instrument No. 20231103-0086366, in the Register's Office for Davidson County, Tennessee (the ***"Instrument"***).

3. Due to inadvertence and/or mistake, the Instrument contains the following defect(s):

On page one of the "Instrument", the Grantor's name was incorrectly spelled as Charles Louis Donnely (the ***"Error"***).

4. This Scrivener's Affidavit is given to correct the Error and to provide notice that:

The Grantor's name is Charles Louis Donnelly.

IN WITNESS WHEREOF, I have executed or caused to be executed this Scrivener's Affidavit as of the 1st day of December, 2023

Name: Lisa Hodges

Sworn to and subscribed before me this 1st day of December, 2023.

Notary Public

My Commission Expires: _____

PATTI ROBITAILLE
STATE OF TENNESSEE
NOTARY PUBLIC
ROBERTSON COUNTY
My Commission Expires 03-03-2027

TRUE COPY CERTIFICATION

I, Lisa Hodges, do hereby make oath that I am a licensed attorney and/or the custodian of the original version of the electronic document tendered for registration herewith and that this electronic document is a true and exact copy of the original document executed and authenticated according to law on the 1st day of December, 2023 (date of document).

Affiant Signature

Date: 12/01/2023

STATE OF TENNESSEE)
COUNTY OF ROBERTSON)

Sworn to and subscribed before me this 1st day of December, 2023.

Notary Public

My Commission Expires: _____

