Karen Johnson Davidson County
Batch# 1086463 DEEDWARR
12/29/2023 09:33:30 AM 5 pgs
Fees: $27.00 Taxes: $0.00
20231229-0100034

This Instrument Prepared By:
Knight Legal
751 Cool Springs Blvd., Ste. 106
Franklin, TN 37067

This instrument was prepared without the benefit of a formal title search, abstract or survey and was prepared with the description of the property as furnished by the parties. The preparer of this instrument assumes no liability whatsoever either for the accuracy of the legal description or the status of the title to the property.

New Owner:	**Send Tax Bill:**	**Map/Parcel**
William Sanders 425 Patterson Street Nashville, TN 37211	Same as New Owner	133 01 0 122.00

STATE OF TENNESSEE)
COUNTY OF WILLIAMSON)

The actual consideration for this transfer is NONE (0). (Exempt pursuant to T.C.A. § 67-4-409[a][3][C]&[D]).

Christy Gitzendanner
AFFIANT

Sworn to and subscribed before me this 13th day of November 2023.

Notary Public

RYAN KNIGHT
STATE OF TENNESSEE NOTARY PUBLIC
WILLIAMSON COUNTY
My Commission Expires 03-19-2025

(Notary Stamp)

EXECUTOR'S DEED

Sarah Ellen Sanders died on October 30, 2020, leaving a will dated June 1, 2020. The will was admitted to probate on April 2, 2021 in the Circuit (Probate) Court of Davidson County, Tennessee, Docket No. 21P687. Christy Lenoir Gitzendanner was appointed executrix and duly qualified. All debts of the decedent have been paid. A copy of the TennCare Release is attached as Exhibit A. A copy of the Death Certificate is attached as Exhibit B. The executrix by signing this Deed releases any right the executrix has to recover this property in the event of the subsequent insolvency of this estate. In accordance with the provisions of the will of Sarah Ellen Sanders, **CHRISTY LENOIR GITZENDANNER**, (executrix/grantor), sells, transfer and conveys to **WILLIAM SANDERS**, a life estate interest, measured by the term of the Grantee's natural life, in the following described real estate in Sumner County, Tennessee:

LAND in Davidson County, Tennessee, being Lot No. 86, on the Plan of Patterson's Subdivision of Maple Hill, of record in Plat Book 332, page 75, said Register's Office, to which reference is hereby made for a more complete and accurate legal description.

Being the same property conveyed to Kevinn P. Sanders and wife, Sarah E. Sanders by deed from Dica Maples, of record in Book 9635, page 469, Register's Office for Davidson County, Tennessee. The aforementioned Kevin P. Sanders having since died

and his interest vest in Sarah E. Sanders through tenants by the entireties.

Said property is conveyed subject to such limitations, restrictions, and encumbrances as may affect the premises.

This is improved property known as 425 Patterson Street, Nashville, TN 37211.

Upon the Grantee's death, the property will immediately vest in the remainderman named under the Last Will and Testament of Sarah Ellen Sanders. Specifically, the remainderman is Christy Lenoir Gitzendanner.

TO HAVE AND TO HOLD said real estate, with all its appurtenances, to the said William Sanders, their successors and assigns, forever. Subject to the terms and conditions and matters as shown on the aforementioned plat of record, I, as executrix only, do covenant with the said grantees, that I, as the executrix only, am lawfully seized and possessed of said land in fee simple, have a good right to convey it and the same is unencumbered. And I, as executrix only, do further covenant and bind myself and representatives, to warrant and forever defend the title to said land to the said grantees, their successors and assigns, against the lawful claims of all persons whomsoever.

Estate of Sarah Ellen Sanders

By: Christy Lenoir Gitzendanner
Christy Lenoir Gitzendanner, Grantor and *Executrix*

STATE OF TENNESSEE)
COUNTY OF WILLIAMSON)

Personally appeared before me, the undersigned, a Notary Public in and for said County and State, the within named Christy Lenoir Gitzendanner whom I am personally acquainted, and who acknowledged that she executed the within instrument for the purposes therein contained.

WITNESS my hand and official seal at Franklin, TN, this 13th day of November, 2023.

NOTARY PUBLIC
My Commission Expires: 3/19/2025

RYAN KNIGHT
STATE OF TENNESSEE NOTARY PUBLIC
WILLIAMSON COUNTY
My Commission Expires 03-19-2025

EXHIBIT A

TN Division of TennCare

RFR PROCESSING UNIT
310 GREAT CIRCLE RD., 3W
NASHVILLE, TN 37243
Phone: (615) 741-0636, Fax (615) 413-1941
Email: RFR.TENNCARE@TN.GOV

#

December 26, 2023

Christopher Ryan Knight
751 Cool Springs Blvd, #106
Franklin, TN 37067

RE: Sanders, Sarah Ellen Date of Death: 10/23/2020 SSN: xxx-xx-7802
Our File Number: 116153

Christopher Ryan Knight:

The referenced decedent did not receive TennCare Long-Term Services and Supports. Therefore, the State of Tennessee hereby releases the TennCare claim against this estate pursuant to Tenn. Code Ann. § 71-5-116(c)(2). This release is not a waiver of the right of the State of Tennessee to pursue criminal or civil penalties if fraud or abuse is found to exist pursuant to Tenn. Code Ann. § 71-5-2601, et seq.

This document is only relevant to TennCare's claim against the Decedent's probate estate. It does not apply to any Special Needs Trusts, Pooled Special Needs Trust, Qualified Income Trusts, or any other type of trust that contains a Medicaid payback provision. If you need a payoff for this type of trust, you must contact TennCare at 844-629-0941, 2 at prompt, or via email at estate.recovery@tn.gov. Please provide the Decedent's death certificate and copy of the trust when making such a request.

Sincerely,

Joan Jackson

TennCare RFR Processing Unit

EXHIBIT B

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

STATE FILE NUMBER 2020 066839

1. Decedent's Legal Name		2. Sex	3. Date of Death
SARAH EILEEN SANDERS		FEMALE	10/23/2020

4. Time of Death (Approx.)	5a. Age	6. Date of Birth	7. Birthplace
06:51 AM	61	[redacted]/1959	LOUISVILLE, KY

8a. Place of Death: HOSPICE FACILITY

8b. Facility Name	8c. City or Town	8d. County of Death
THE RESIDENCE/ALIVE HOSPICE	NASHVILLE	DAVIDSON

9. Marital Status	10. Surviving Spouse (name prior to first marriage)	11a. Decedent's Usual Occupation	11b. Kind of Business/Industry
WIDOWED		HOMEMAKER	OWN HOME

12. Social Security Number	13a. Residence-State or Foreign Country	13b. County	13c. City or Town
[redacted]-7802	TENNESSEE	DAVIDSON	NASHVILLE

13d. Street and Number	13e. Inside City Limits?	13f. Zip Code	14. Was Decedent ever in U.S. Armed Forces?
425 PATTERSON STREET	YES	37211	NO

15. Decedent's Education	16. Decedent of Hispanic Origin?	17. Decedent's Race
ASSOCIATE DEGREE	NO, NOT SPANISH/HISPANIC/LATINO	WHITE

18. Father's Name	19. Mother's Name Prior to First Marriage
RICHARD H BENSON	MARGARET DONNA SMITH

20a. Informant's Name	20b. Relationship to Decedent	20c. Mailing Address
CHRISTY GITZENDANNER	DAUGHTER	917 LAVERGNE LANE, LAVERGNE, TN 37086

21a. Method of Disposition	21b. Place of Disposition	21c. Location
CREMATION	MUSIC CITY CREMATORY SERVICE	NASHVILLE, TN

22a. Signature of Funeral Director	22b. License Number	22c. Signature of Embalmer	22d. License Number
▶ /e/ J. DAVID DIAL	5144	▶	

23a. Name and Address of Funeral Home	23b. License Number
WOODBINE FUNERAL HOME, INC. - HICKORY CHAPEL, 5852 NOLENSVILLE ROAD, NASHVILLE, TN 37211	760

24. Registrar's Signature	25. Date Filed
▶ /e/ EDWARD G BISHOP III	10/29/2020

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/ LAURA THARPE	048448	10/26/2020

27d. Name and Address: LAURA THARPE, 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. ENTER ONLY ONE CAUSE ON A LINE.

		Approximate Interval: Onset to Death
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a. GLIOBLASTOMA, MULTIFORME	
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.	
	c.	
	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? NO

29b. Were Autopsy Findings Available to Complete the Cause of Death?

30. Manner of Death	31. Did Tobacco Use Contribute to Death?	32. If Female:
NATURAL	UNKNOWN	NOT PREGNANT WITHIN PAST YEAR

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-1059E

RDA 10712

12527670

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

Lisa Piercey, MD, MBA, FAAP
Commissioner

1 2 5 2 7 6 7 0
Date Issued: Oct-30-2020

CERTIFICATION OF VITAL RECORD

20231229010034

Certificate of Authenticity

I, Ryan Knight, 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 November 13, 2023.

Affiant Signature

December 5, 2023
Date

STATE OF TENNESSEE
COUNTY OF WILLIAMSON

Sworn to and subscribed before me this 5th day of December, 2023.

Notary's Signature

My Commission Expires: 01/05/2026
Date

Notary's Seal (if on paper)

