This Instrument Prepared By:	Parcel ID #: 58-28-05-21-3-001-028.000
Clint C. Thomas. P.C. Attorney at Law P.O. Box 1422 Calera, AL 35040	
Quitclaim Deed	
STATE OF ALABAMA )	
COUNTY OF SHELBY	20230802000231960 1/3 \$30.00 Shelby Cnty Judge of Probate, AL 08/02/2023 10:10:49 AM FILED/CERT
Thousand Seven Hundred Thirty-One and 92/1 consideration in hand paid, the receipt whereof Hackworth, a Simple woman RELEASES, QUITCLAIMS, GRANTS, and Cknown as the GRANTEE, all of the GRANTC following described real estate, situated in She	f is hereby acknowledged, that <b>Annie Kynard</b> , hereinafter known as the GRANTOR, hereby CONVEYS to <b>David C. Reaves, Sr.,</b> hereinafter OR'S right, title, interest, and claim in or to the
Page 13, in the Office of the Judge of S	· · · · · · · · · · · · · · · · · · ·
The legal description herein was provided certain instrument recorded as Instrument # 20 County Probate Office, and was made without	
TO HAVE AND TO HOLD to said GRANTE	E forever.
Given under my hand and seal.	this the $20^{\circ}$ day of $3uly$ . 2023.
Annie Kynard-Hackworth	

Grantor



20230802000231960 2/3 \$30.00 Shelby Cnty Judge of Probate, AL 08/02/2023 10:10:49 AM FILED/CERT

STATE OF ALABAMA	)
1 1	)
COUNTY OF Shell	)

## ACKNOWLEDGMENT

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that, *Annie Kynard-Hackworth*, who is known to me, acknowledged before me on this day, that, being informed of the contents of the conveyance, he executed the same voluntarily on the day the same bears date.

> 1 i i

Commission Expires 05/23/2026

STATE

NOTARY PUBLIC

My Commission Expires: 05-23-22ん

Closing did not occur in the office of preparer.

## Real Estate Sales Validation Form

This Document must be filed in accordance with Code of Alabama 1975, Section 40-22-1  Grantor's Name  Amie Kyngo - Hackworth Grantee's Name  242 Lating Form  Mailing Address  Mailing Address  Mailing Address  Mailing Address  Stelland Section 40-22-1  Mailing Address
Property Address  St. 28-25-21-3-28  Date of Sale  Total Purchase Price  Or  Actual Value  Or  Assessor's Market Value  Silvin Augustual value claimed on this form can be verified in the following documentary  evidence: (check one) (Recordation of documentary evidence is not required)  Bill of Sale  Sales Contract  Closing Statement  If the conveyance document presented for recordation contains all of the required information referenced above, the filing of this form is not required
above, the filing of this form is not required.
Grantor's name and mailing address - provide the name of the person or persons conveying interest to property and their current mailing address.
Grantee's name and mailing address - provide the name of the person or persons to whom interest to property is being conveyed.
Property address - the physical address of the property being conveyed, if available.
Date of Sale - the date on which interest to the property was conveyed.
Total purchase price - the total amount paid for the purchase of the property, both real and personal, being conveyed by the instrument offered for record.
Actual value - if the property is not being sold, the true value of the property, both real and personal, being conveyed by the instrument offered for record. This may be evidenced by an appraisal conducted by a licensed appraiser or the assessor's current market value.
If no proof is provided and the value must be determined, the current estimate of fair market value, excluding current use valuation, of the property as determined by the local official charged with the responsibility of valuing property for property tax purposes will be used and the taxpayer will be penalized pursuant to Code of Alabama 1975 § 40-22-1 (h).
l attest, to the best of my knowledge and belief that the information contained in this document is true and accurate. I further understand that any false statements claimed on this form may result in the imposition of the penalty indicated in Code of Alabama 1975 § 40-22-1 (h).
Date 7/20123 Print MAVID C REAVES
Unattested  (verified by)  Sign WMA (September/Agent) circle one Form RT-1