

WARRANTY DEED

STATE OF ALABAMA)

COUNTY OF SHELBY)

Duplicate

Know all men by these presents, That in consideration of being the legal heirs of William W. Crim, deceased, Geraldine Crim, a widow, does hereby convey unto Geraldine Crim a widow, Peggy Crim, an unmarried woman the following described real property valued at \$5,000.00 (Five Thousand Dollars and No Cents) in Shelby County, Alabama, to-wit:

A part of the NW1/4 of NW1/4, Section 29, Township 21, South, Range 2 West, more particularly described as follows: Begin at a point on the West boundary of said Quarter Quarter Section, which point is 1181.81 feet south of the NW corner of said Quarter Quarter Section, which point is marked by an iron pin, and which said point constitutes the NW corner of land heretofore conveyed William W. Crim; thence Easterly along the North boundary of said William W. Crim land to the East boundary of said Quarter Quarter Section; thence Northerly along the East boundary of said Quarter Quarter Section 100.59 feet: thence Westerly and parallel with the North boundary of said William W. Crim land to a point on the West boundary of said Quarter Quarter Section; thence Southerly along the West boundary of said Quarter Quarter Section 101.28 feet to the point of beginning. Containing 3 acres, more or less.

This property originally recorded in Deed Book 202 Page 321 in the Probate Court of Shelby County, Alabama..

NOTE: This parcel shown and described herein may be subject to setbacks, easements, zoning and restrictions that may be found in the Probate Office of said County. That this deed has been prepared without the benefit of a title search or new survey.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this the 31st day of October, 2008.

Witness

Geraldine C. Crim
GERALDINE CRIM

Witness

Peggy E. Crim
PEGGY CRIM



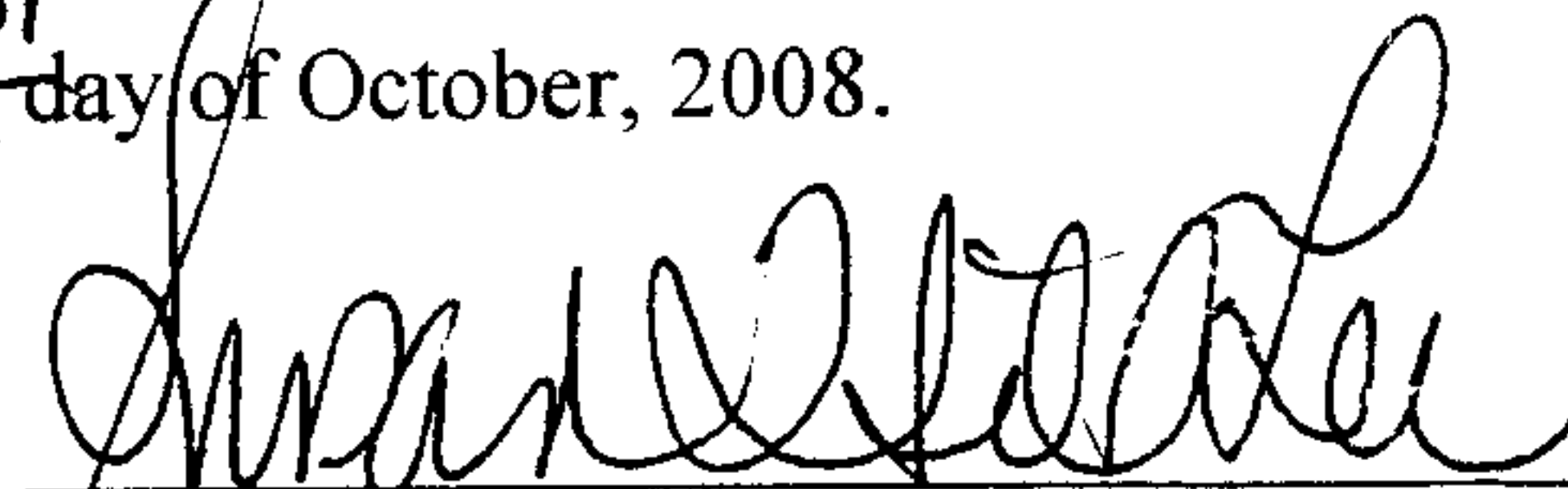
20081114000439250 2/3 \$22.00
Shelby Cnty Judge of Probate, AL
11/14/2008 08:44:53AM FILED/CERT

STATE OF ALABAMA)
)
COUNTY OF SHELBY)

General Acknowledgment

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that GERALDINE CRIM, whose name is signed to the foregoing conveyance, and who is known to me, acknowledged before me on this day, that, being informed of the contents of the conveyance, she executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this 31st day of October, 2008.



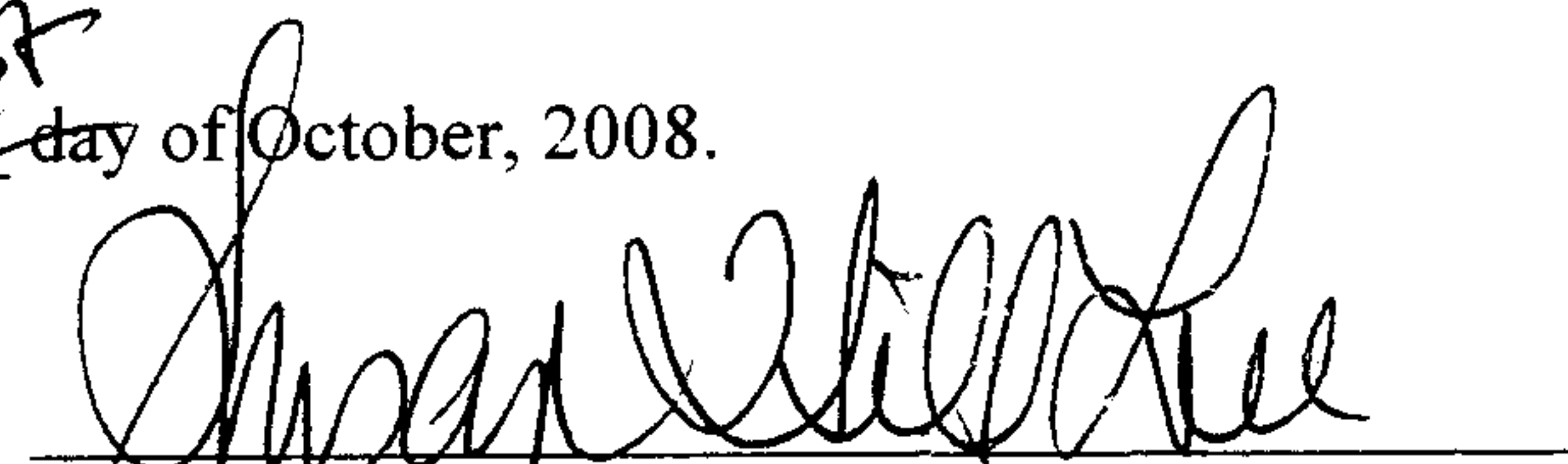
Notary Public

STATE OF ALABAMA)
)
COUNTY OF SHELBY)

General Acknowledgment

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that PEGGY CRIM, whose name is signed to the foregoing conveyance, and who is known to me, acknowledged before me on this day, that, being informed of the contents of the conveyance, she executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this 31st day of October, 2008.



Notary Public

Shelby County, AL 11/14/2008
State of Alabama
Deed Tax: \$5.00

This is a true and exact copy of the record on file with the Shelby County Health Department

Shula Keller

Signature of Local Registrar

JUN 25 2002

Date of Issue



20081114000439250 3/3 \$22.00
Shelby Cnty Judge of Probate, AL
11/14/2008 08:44:53AM FILED/CERT

ALABAMA CERTIFICATE OF DEATH

101

TYPE IN PERMANENT
BLACK INK. DO NOT
USE GREEN, RED, OR
BLUE INK.

County File Number		State File Number	
1. DECEASED—NAME First Middle Last (Type last name all capitals)		2. DATE OF DEATH (Month, Day, Year)	
William Wesley CRIM		June 10, 2002	
3. COUNTY OF DEATH		4. CITY, TOWN, OR LOCATION OF DEATH AND ZIP CODE	
Shelby		Alabaster 35007	
5. INSIDE CITY LIMITS (Specify Yes or No)		6. PLACE OF DEATH—HOSPITAL OR OTHER INSTITUTION—(If not in either, give street and number)	
Yes		Shelby Baptist Medical Center	
7. IF HOSPITAL (Specify Inpatient, ER or Outpatient, OOA)		8. RACE—(Specify American Indian, Black, White, etc.)	
Inpatient		White	
9. SEX		10. DECEASED'S SOCIAL SECURITY NUMBER	
Male			
11. AGE		12. DATE OF BIRTH (Month, Day, Year)	
79 YRS.		June 04, 1923	
13. EDUCATION (Specify ONLY highest grade completed below)		14. MARITAL STATUS (Specify Married, Never Married, Widowed, Divorced)	
Elementary or High School (0-12)		Married	
15. SURVIVING SPOUSE (If wife, give maiden name)		16. Was Decedent ever in Armed Forces (Specify Yes or No)	
Geraldine Cook		Yes	
17. STATE OF BIRTH (If not in USA, name country)		18. RESIDENCE—STATE	
Alabama		Alabama	
19. INSIDE CITY LIMITS (Specify Yes or No)		20. STREET AND NUMBER	
No		1282 Highway 87	
21. USUAL OCCUPATION (Give kind of work done during most of working life even if retired)		22. KIND OF BUSINESS OR INDUSTRY	
Owner		Radio/Television Sales and Service	
23. FATHER—NAME First Middle Last		24. MAIDEN NAME OF MOTHER—First Middle Last	
Jesse Lee Crim		Malvina Jane Prestridge	
25. DISPOSITION OF BODY (Specify Burial, Cremation, Medical Donation, Hospital Disposal, Other)		26. DATE OF DISPOSITION (Month, Day, Year)	
Burial		June 12, 2002	
27. CEMETERY OR CREMATORY—Name		28. LOCATION—(City or Town—State)	
Harless Cemetery		Montevallo, AL	
29. FUNERAL HOME—Name and Address		30. DATE SIGNED BY FUNERAL DIRECTOR	
Bolton Brown Service F.H. 207 Hwy. 47 South, Columbiana, AL 35051		June 17, 2002	
31. CERTIFYING PHYSICIAN (Physician certifying cause of death) "To the best of my knowledge death occurred at the time and date, and due to the cause(s) and manner stated."		32. DATE SIGNED (Month, Day, Year)	
Medical Examiner — Coroner — Signature: <i>Sam Roberts</i>		06-14-02	
33. TIME AND DATE OF DEATH		34. NAME AND TITLE OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 46)	
0450 06/10/02		Sam Roberts, M.D.	
35. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 46)		36. CERTIFIER LICENSE NUMBER	
P.O. Box 1398, ALABASTER, AL 35007		07891	
37. REGISTRAR—Signature		38. DATE FILED (Month, Day, Year)	
<i>Shula Keller</i>		June 24, 2002	

MEDICAL CERTIFICATION

46. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. LIST ONLY ONE CAUSE ON EACH LINE.		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. <i>Sepsis shock</i>			
b. <i>Pneumonia</i>			
c. <i>Coronary artery disease / Parkinson's disease / Alzheimer's disease</i>			
47. PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.		48. WAS THERE A PREGNANCY IN LAST 42 DAYS? (Specify Yes, No, or Unk.)	
49. MANNER OF DEATH (Specify—Accident, Homicide, Suicide, Undetermined Circumstances, Pending Investigation, Natural Cause)		50. AUTOPSY (Specify Yes or No)	
51. HOW INJURY OCCURRED (Enter nature of injury in Item 46, Part I or Item 47, Part II)		52. DATE OF INJURY (Month, Day, Year)	
53. INJURY AT WORK (Specify Yes or No)		54. HOUR OF INJURY	
55. PLACE OF INJURY—(Specify at home, farm, street, factory, office building, etc.)		56. LOCATION OF INJURY (Street or R.F.D. No., City or Town, State)	

This is a legal record and must be filed within five (5) days after death.

Shelby County, AL 11/14/2008
State of Alabama

Deed Tax: \$5.00

NAME OF DECEASED: Crim, William
SSN: 423122318
Added per J. Thompson at Hosp
#41 S. Keller 6/24/02