



20090512000178400 1/3 \$187.00
Shelby Cnty Judge of Probate, AL
05/12/2009 12:16:28 PM FILED/CERT

Shelby County, AL 05/12/2009

State of Alabama

Deed Tax : \$169.00

Recording Requested by &
When Recorded Return To:

US Recordings, Inc. *Record*
2925 Country Drive *1st*
St. Paul, MN 55117
7549522-01

This Document Prepared By:

Betty A. Latsis
105 Brook Highland Cove
Birmingham, Alabama 35242

After Recording Send Tax Notice To:

Betty A. Latsis
105 Brook Highland Cove
Birmingham, Alabama 35242

Assessor's Parcel Number: 039320006061000
Fair Market Value: \$161,000.00

QUITCLAIM DEED
TITLE OF DOCUMENT

CH 3194764

R# 3208854

STATE OF ALABAMA

KNOW ALL MEN BY THESE PRESENTS:

SHELBY COUNTY

THAT in consideration of ONE AND NO/100 DOLLAR (\$1.00), to the undersigned grantor (whether one or more), in hand paid by the grantee herein, the receipt whereof is acknowledged, I or we, **Betty A. Latsis, an unmarried woman, surviving joint tenant of Joseph J. Latsis, also known as Joseph James Latsis as per attached certified copy of Certificate of Death**, (herein referred to as grantor, whether one or more), do hereby remise, release, quitclaim and convey to: **Betty A. Latsis, an unmarried woman**, (herein referred to as grantee, whether one or more), the following described real estate, situated in Shelby County, Alabama, to wit:

LOT 61, ACCORDING TO THE SURVEY OF THE VILLAGE AT BROOK HIGHLAND AS RECORDED IN MAP BOOK 24, PAGE 93 IN THE PROBATE OFFICE OF THE SHELBY COUNTY, ALABAMA.

COMMONLY known as: 105 Brook Highland Cove, Birmingham, Alabama 35242

Source of Title Ref.: Deed: Recorded May 21, 1999; BK 1999, PG 21375

TO have and to hold to the said grantee, his, her or their heirs and assigns forever.

The land described herein (You must make a selection):

☒ is homestead property of the said Grantor

☐ is **NOT** homestead property of the said Grantor

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IN WITNESS WHEREOF, **Betty A. Latsis** have hereunto set my (our) hand(s) and seal(s), this
22 day of April, 2009

Betty A. Latsis
Betty A. Latsis

General Acknowledgement

STATE OF Al
Shelby COUNTY

I, Bona Brown a Notary Public in and for said
County, in said State, hereby certify that **Betty A. Latsis**, whose name(s) (is) are signed to the
foregoing conveyance and who (is) are known to me, acknowledged before me on this day, that,
being informed of the contents of the above and foregoing conveyance, he (she) / they executed the
same voluntarily on the day the same bears date.

NOTARY STAMP/SEAL

Given under my hand and official seal of office this
22 day of April, 2009

Bona Brown
NOTARY PUBLIC Bona Brown
My Commission Expires: 05/06/10



U00634124

1632 5/5/2009 75649522/1

ALABAMA
Center for Health Statistics20090512000178400 3/3 \$187.00
Shelby Cnty Judge of Probate, AL
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08-30954

ALABAMA
CERTIFICATE OF DEATH

State File Number 101

County
File
Number —

1. DECEASED—NAME First Middle Last (Type last name all capitals) Joseph James LATSIS			2. DATE OF DEATH (Month, Day, Year) September 1, 2008		3. COUNTY OF DEATH Jefferson	
4. CITY, TOWN, OR LOCATION OF DEATH AND ZIP CODE Birmingham 35213			5. INSIDE CITY LIMITS (Specify Yes or No) Yes		6. PLACE OF DEATH—HOSPITAL OR OTHER INSTITUTION—(If not in either, give street and number) Trinity Medical Center	
7. IF HOSPITAL (Specify Inpatient, ER or Outpatient, DOA) Inpatient			8. OF HISPANIC ORIGIN (Specify Yes or No) If Yes, Specify Cuban, Mexican, Puerto Rican, etc. No		9. RACE—(Specify American Indian, Black, White, etc.) White	
10. SEX Male						
11. AGE 1979 YRS.		12. UNDER 1 YEAR MOS. DAYS HOURS MINS.		13. DATE OF BIRTH (Month, Day, Year) July 4, 1929		
14. EDUCATION (Specify ONLY highest grade completed below) Elementary or High School (0-12) 4		15. MARITAL STATUS (Specify Married, Never Married, Widowed, Divorced) Married		16. SURVIVING SPOUSE (If wife, give maiden name) Elizabeth Ann Angrisano		
17. Was Decedent ever in Armed Forces (Specify Yes or No) Yes						
19. STATE OF BIRTH (If not in USA, name country) Alabama		20. RESIDENCE—STATE Alabama		21. COUNTY Jefferson		
22. CITY, TOWN, OR LOCATION AND ZIP CODE Birmingham 35242						
23. INSIDE CITY LIMITS (Specify Yes or No) Yes		24. STREET AND NUMBER 105 Brook Highland Cove		25. INFORMANT—Name and Address Betty Jo Latsis 1201 Berwick Road Birmingham, AL 35242		
26. USUAL OCCUPATION (Give kind of work done during most of working life even if retired) Owner			27. KIND OF BUSINESS OR INDUSTRY Yellow Cab. Company			
28. FATHER—NAME First Middle Last Thomas Michael Latsis			29. MAIDEN NAME OF MOTHER— First Middle Last Teresa Agnes Saladino			
30. DISPOSITION OF BODY (Specify Burial, Cremation, Medical Donation, Hospital Disposal, Other) Burial		31. DATE OF DISPOSITION (Month, Day, Year) Sept. 4, 2008		32. CEMETERY OR CREMATORY—Name Elmwood Cemetery		
33. LOCATION—(City or Town—State) Birmingham, AL						
34. FUNERAL HOME—Name and Address Ridout's Valley Chapel 1800 Oxmoor Road Homewood, AL 35209		35. FUNERAL DIRECTOR—Signature Garnet Spradlin		36. DATE SIGNED BY FUNERAL DIRECTOR Sept. 11, 2008		
37. X: 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." Medical Examiner — Coroner — Signature: Russell G. Beatty MD			38. DATE SIGNED (Month, Day, Year) 9-3-08			
39. TIME AND DATE OF DEATH 2:52PM 9-1-2008		40. DATE AND TIME PRONOUNCED DEAD (For Coroner/M.E. use only)		41. NAME AND TITLE OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 46) Russell G Beatty MD		
42. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 46) 880 MONTCLAIR ROAD #270 BIRMINGHAM, ALABAMA 35213				43. CERTIFIER LICENSE NUMBER 14075		
44. REGISTRAR—Signature Dorothy S. Harshbarger				45. DATE FILED (Month, Day, Year) September 11, 2008		

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. IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. Pneumonia b. Lung Cancer Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST c. d. e. f. g. h. i. j. k. l. m. n. o. p. q. r. s. t. u. v. w. x. y. z. aa. ab. ac. ad. ae. af. ag. ah. ai. aj. ak. al. am. an. ao. ap. aq. ar. as. at. au. av. aw. ax. ay. az. ba. bb. bc. bd. be. bf. bg. bh. bi. bj. bk. bl. bm. bn. bo. bp. bq. br. bs. bt. bu. bv. bw. bx. by. bz. ca. cb. cc. cd. ce. cf. cg. ch. ci. cj. ck. cl. cm. cn. co. cp. cq. cr. cs. ct. cu. cv. cw. cx. cy. cz. da. db. dc. dd. de. df. dg. dh. di. dj. dk. dl. dm. dn. do. dp. dq. dr. ds. dt. du. dv. dw. dx. dy. dz. ea. eb. ec. ed. ee. ef. eg. eh. ei. ej. ek. el. em. en. eo. ep. eq. er. es. et. eu. ev. ew. ex. ey. ez. fa. fb. fc. fd. fe. ff. fg. fh. fi. fj. fk. fl. fm. fn. fo. fp. fq. fr. fs. ft. fu. fv. fw. fx. fy. fz. ga. gb. gc. gd. ge. gf. gg. gh. gi. gj. gk. gl. gm. gn. go. gp. gq. gr. gs. gt. gu. gv. gw. gx. gy. gz. ha. hb. hc. hd. he. hf. hg. hh. hi. hj. hk. hl. hm. hn. ho. hp. hq. hr. hs. ht. hu. hv. hw. hx. hy. hz. ia. ib. ic. id. ie. if. ig. ih. ii. ij. ik. il. im. in. io. ip. iq. ir. is. it. iu. iv. iw. ix. iy. iz. ja. jb. jc. jd. je. jf. jg. jh. ji. jj. jk. jl. jm. jn. jo. jp. jq. jr. js. jt. ju. jv. jw. jx. jy. jz. ka. kb. kc. kd. ke. kf. kg. kh. ki. kj. kk. kl. km. kn. ko. kp. kq. kr. ks. kt. ku. kv. kw. kx. ky. kz. la. lb. lc. ld. le. lf. lg. lh. li. lj. lk. ll. lm. ln. lo. lp. lq. lr. ls. lt. lu. lv. lw. lx. ly. lz. ma. mb. mc. md. me. mf. mg. mh. mi. mj. mk. ml. mm. mn. mo. mp. mq. mr. ms. mt. mu. mv. mw. mx. my. mz. na. nb. nc. nd. ne. nf. ng. nh. ni. nj. nk. nl. nm. nn. no. np. nq. nr. ns. nt. nu. nv. nw. nx. ny. nz. oa. ob. oc. od. oe. of. og. oh. oi. oj. ok. ol. om. on. oo. op. oq. or. os. ot. ou. ov. ow. ox. oy. oz. pa. pb. pc. pd. pe. pf. pg. ph. pi. pj. pk. pl. pm. pn. po. pp. pq. pr. ps. pt. pu. pv. pw. px. py. pz. qa. qb. qc. qd. qe. qf. qg. qh. qi. qj. qk. ql. qm. qn. qo. qp. qq. qr. qs. qt. qu. qv. qw. qx. qy. qz. ra. rb. rc. rd. re. rf. rg. rh. ri. rj. rk. rl. rm. rn. ro. rp. rq. rr. rs. rt. ru. rv. rw. rx. ry. rz. sa. sb. sc. sd. se. sf. sg. sh. si. sj. sk. sl. sm. sn. so. sp. sq. sr. ss. st. su. sv. sw. sx. sy. sz. ta. tb. tc. td. te. tf. tg. th. ti. tj. tk. tl. tm. tn. to. tp. tq. tr. ts. tu. tv. tw. tx. ty. tz. ua. ub. uc. ud. ue. uf. ug. uh. ui. uj. uk. ul. um. un. uo. up. uq. ur. us. ut. uu. uv. uw. ux. uy. uz. va. vb. vc. vd. ve. vf. vg. vh. vi. vj. vk. vl. vm. vn. vo. vp. vq. vr. vs. vt. vu. vv. vw. vx. vy. vz. wa. wb. wc. wd. we. wf. wg. wh. wi. wj. wk. wl. wm. wn. wo. wp. wq. wr. ws. wt. wu. wv. ww. wx. wy. wz. xa. xb. xc. xd. xe. xf. xg. xh. xi. xj. xk. xl. xm. xn. xo. xp. xq. xr. xs. xt. xu. xv. xw. xx. xy. xz. ya. yb. yc. yd. ye. yf. yg. yh. yi. yj. yk. yl. ym. yn. yo. yp. yq. yr. ys. yt. yu. yv. yw. yx. yy. yz. za. zb. zc. zd. ze. zf. zg. zh. zi. zj. zk. zl. zm. zn. zo. zp. zq. zr. zs. zt. zu. zv. zw. zx. zy. zz.		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) Natural Cause 50. AUTOPSY (Specify Yes or No) No 51. If yes, were findings considered in determining cause of death? (Specify Yes or No) 52. HOW INJURY OCCURRED (Enter nature of injury in Item 46, Part I or Item 47, Part II) 53. DATE OF INJURY (Month, Day, Year) 54. HOUR OF INJURY M. 55. INJURY AT WORK (Specify Yes or No) 56. PLACE OF INJURY—(Specify at home, farm, street, factory, office building, etc.) 57. LOCATION OF INJURY (Street or R.F.D. No., City or Town, State)	
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This is a legal record and must be filed within five (5) days after death.

SEP 15 2008

ADPH-HS 2/Rev. 11-93

I, Dorothy S. Harshbarger, State Registrar of Health Statistics, certify this is a true and exact copy of the original certificate filed in the Center for Health Statistics, State of Alabama, Department of Public Health, Montgomery, Alabama, and have caused the official seal of the Center for Health Statistics to be affixed. 2008-407-635-4

September 19, 2008

Dorothy S. Harshbarger, State Registrar