

THE PREPARER OF THIS DEED MAKES NO REPRESENTATION AS TO THE STATUS OF THE TITLE OF THE PROPERTY DESCRIBED HEREIN, OR AS TO THE ACCURACY OF THE DESCRIPTION CONTAINED IN PREVIOUSLY FILED DEEDS

This instrument was prepared by:
Kendall W. Maddox
Kendall Maddox & Associates, LLC
2550 Acton Road, Ste 210
Birmingham, AL 35243

Send Tax Notice To:
V.L. Wood
2195 Smokey Road
Alabaster, AL 35007

WARRANTY DEED

STATE OF ALABAMA)
SHELBY COUNTY) KNOW ALL MEN BY THESE PRESENTS:

That in consideration of TEN THOUSAND DOLLARS AND OTHER GOOD AND VALUABLE CONSIDERATION to the undersigned grantor (whether one or more), in hand paid by the grantee herein, the receipt whereof is acknowledged, I or we,

V.L. WOOD, AN UNMARRIED MAN

(herein referred to as Grantor, whether one or more), grants, bargains, sells, and conveys unto

V.L. WOOD, TRUSTEE, OR HIS SUCCESSORS IN TRUST, UNDER THE WOOD LIVING TRUST, DATED MARCH 2, 2006, AND ANY AMENDMENTS THERETO

(herein referred to as Grantee, whether one or more), the following described real estate, situated in Shelby County, Alabama, to-wit:

Lot 39 according to the Survey of Cambridge Pointe, First Sector as recorded in Map Book 17, Page 59, Shelby County, Alabama Records. Subject to taxes, restrictions, rights-of-way, exceptions, conditions, covenants and easements of record.

Together with all and singular the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining in fee simple.

V.L. Wood is the surviving Grantee in that certain warranty deed recorded at Instrument Number 20150112000012330 dated January 31, 2008. The other Grantee, C.C. Wood, died on or about November 16, 2014. A copy of her death certificate is attached.

TO HAVE AND TO HOLD to the said grantee, his, her or their successors and assigns forever.

THE GRANTOR herein grants full power and authority by this deed to the Trustee(s), and either of them, and all successor trustee(s) to protect, conserve, sell, lease, pledge, mortgage, borrow against, encumber, convey, transfer or otherwise manage and dispose of all or any portion of the property herein described, or any interest therein, without the consent or approval of any other party and without further proof of such authority; no person or entity paying money to or delivering property to any Trustee or successor trustee shall be required to see to its application; and all persons or entities relying in good faith on this deed and the powers contained herein regarding the Trustee(s) (or successor trustee(s)) and their powers over the property herein conveyed shall be held harmless from any resulting loss or liability from such good faith reliance.

And I (we) do for myself (ourselves) and for my (our) heirs, executors, and administrators covenant with the said GRANTEE, his, her or their successors and assigns, that I am (we are) lawfully seized in fee simple of said premises: that they are free from all encumbrances, unless otherwise noted above: that I (we) have a good right to sell and convey the same as aforesaid: that I (we) will and my (our) heirs, executors and administrators shall warrant and defend the same to the said GRANTEE, his, her or their successors and assigns forever, against the lawful claims of all persons.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10 day of August, 2015.

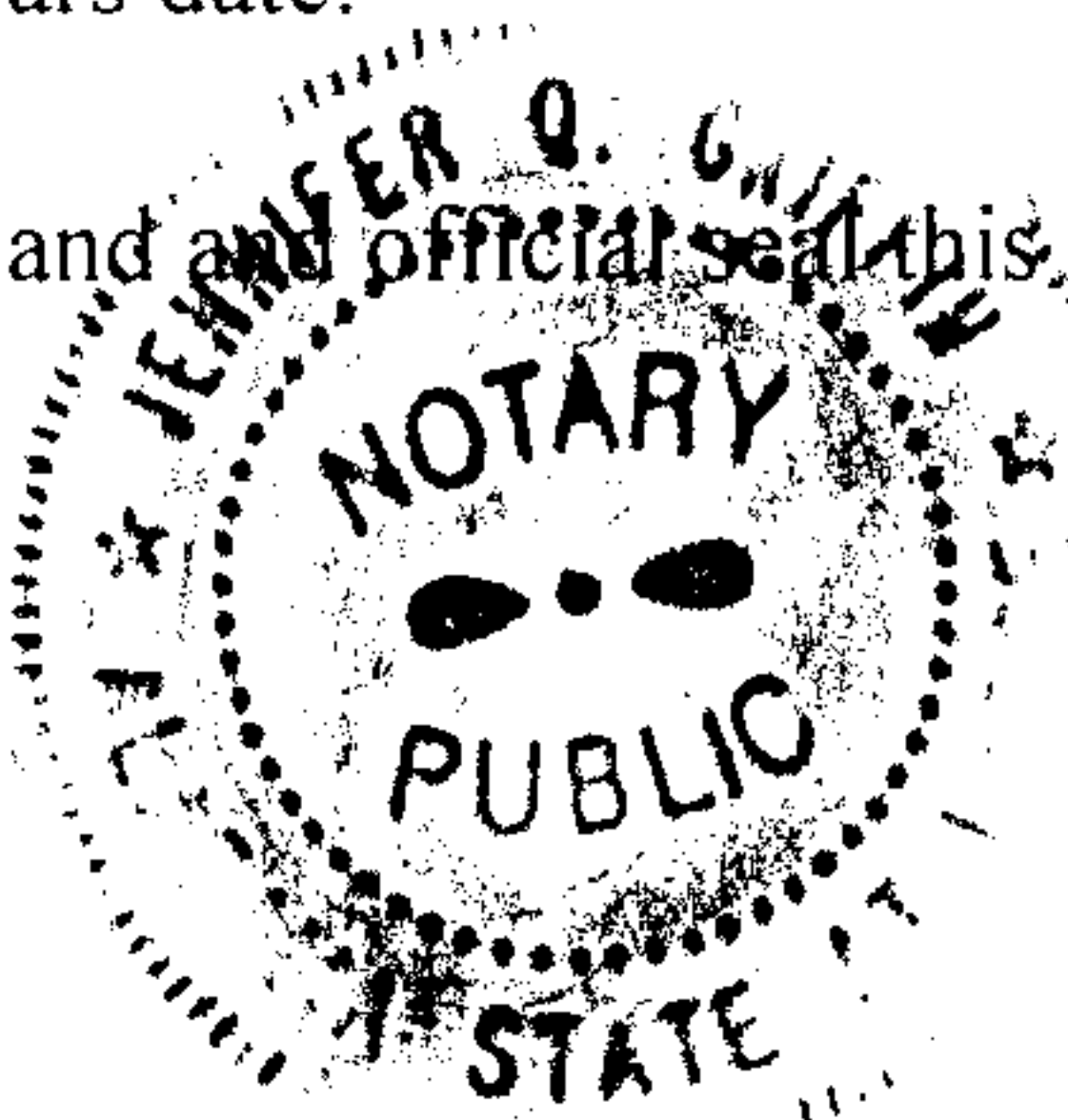
V.L. Wood
V.L. WOOD

20150817000285400 1/3 \$30.00
Shelby Cnty Judge of Probate, AL
08/17/2015 01:30:39 PM FILED/CERT

STATE OF ALABAMA)
JEFFERSON COUNTY) GENERAL ACKNOWLEDGEMENT:

I, Jennifer Q. Griffin, a Notary Public in and for said County, in said State, hereby certify that V.L. Wood, whose name(s) is/are signed to the foregoing conveyance, and who is/are known to me, acknowledged before me on this date, that, being informed of the contents of the conveyance has/have executed the same voluntarily on the day the same bears date.

Given my hand and official seal this 10 day of August, 2015.



Notary Public
My Commission Expires: 9/25/2018

Shelby County, AL 08/17/2015
State of Alabama
Deed Tax: \$10.00

ALABAMA

Center for Health Statistics

ALABAMA

CERTIFICATE OF DEATH

2014-044016

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

County
File
Number -

State File Number 101

3. 059014	1. DECEASED - NAME First, Middle, Last (Type last name in all capitals) Charlotte D. WOOD	2. DATE OF DEATH (Month, Day, Year) November 16, 2014	3. COUNTY OF DEATH Shelby
6. 000	4. CITY, TOWN, OR LOCATION OF DEATH AND ZIP CODE Alabaster 35007	5. INSIDE CITY LIMITS (Specify Yes or No) Yes	6. PLACE OF DEATH - HOSPITAL OR OTHER INSTITUTION (If not either, give street and number) 2195 Smokey Rd.
19. 01	7. IF HOSPITAL (Specify Inpatient, ER or Outpatient, DOA) No	8. OF HISPANIC ORIGIN (Specify Yes or No) If Yes, Specify Cuban, Mexican, Puerto Rican, etc. No	9. RACE - (Specify American Indian, White, Black, etc.) White
20. 059014	10. SEX Female	11. AGE 67 YRS.	12. UNDER 1 YEAR MOS. DAYS HOURS MINS.
26. 59402	13. DATE OF BIRTH (Month, Day, Year) February 22, 1947	14. DECEASED'S SOCIAL SECURITY NUMBER	15. EDUCATION (Specify Only Highest Grade Completed Below) Elementary or High School (0-12) College (1-4 or 5+) 1
	16. MARITAL STATUS (Specify - Married, Never Married, Widowed, Divorced) Married	17. SURVIVING SPOUSE (If wife, give maiden name) Vertice Wood	18. Was Decedent ever in Armed Forces (Specify Yes or No) No
	19. STATE OF BIRTH (If not USA, name country) Alabama	20. RESIDENCE - STATE Alabama	21. COUNTY Shelby
	22. CITY, TOWN, OR LOCATION AND ZIP CODE Alabaster 35007	23. INSIDE CITY LIMITS (Specify Yes or No) Yes	24. STREET AND NUMBER 2195 Smokey Rd.
	25. INFORMANT - Name and Address Vertice Wood 2195 Smokey Rd. Alabaster, AL 35007	26. USUAL OCCUPATION - (Give kind of work done during most of working life even if retired) Realtor	27. KIND OF BUSINESS OR INDUSTRY Real Estate
	28. FATHER - NAME First, Middle, Last Percy Shannon Drake	29. MAIDEN NAME OF MOTHER - First, Middle, Last Martha Juna Lake	30. DISPOSITION OF BODY (Specify Burial, Cremation, Medical Donation, Hospital Disposal, Other) Burial
	31. DATE OF DISPOSITION (Month, Day, Year) 11/19/2014	32. CEMETERY OR CREMATORY - Name Forest Crest Cemetery	33. LOCATION - (City or Town-State) Irondale, AL
	34. FUNERAL HOME - Name and Address Southern Heritage 475 Cahaba Valley Rd. Pelham, AL 35124	35. FUNERAL DIRECTOR - Signature Jana McManis	36. DATE SIGNED BY FUNERAL DIRECTOR 12/03/2014
	37. Certifying Physician (Physician certifying cause of death) "To the best of my knowledge, death occurred at the time and date due to the cause(s) and manner stated." Medical Examiner - Coroner Signature: <i>W. S. Perry M.D.</i>	38. DATE SIGNED (Month, Day, Year) Nov. 17, 2014	39. TIME AND DATE OF DEATH 0945 11/16/14
	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) C. Vernon Skoog M.D.	42. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 46) 1700 4th Ave. No. Bradman, AL 35020
	43. CERTIFIER LICENSE NUMBER 4242	44. REGISTRAR - Signature Shula Keller	45. DATE FILED (Month, Day, Year) Dec 11, 2014

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 arrest, shock, or heart failure. LIST ONLY ONE CAUSE ON EACH LINE. IMMEDIATE CAUSE (Final disease or condition resulting in death) → <i>Pancreatic Cancer</i>	APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
a. DUE TO (OR AS A CONSEQUENCE OF):	
b. DUE TO (OR AS A CONSEQUENCE OF):	
c. DUE TO (OR AS A CONSEQUENCE OF):	
d. DUE TO (OR AS A CONSEQUENCE OF):	
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, Unk.)
49. MANNER OF DEATH (Specify - Accident, Homicide, Suicide, Undetermined Circumstances, Pending Investigation, Natural Cause) <i>Natural Cause</i>	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 Item 48, 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)	

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

DEC 12 2014

ADPH-HS-2/Rev.11-93

This is an official certified copy of the original record filed in the Center of Health Statistics, Alabama Department of Public Health, Montgomery, Alabama. 2014-462-351-7

December 15, 2014



20150817000285400 2/3 \$30.00
Shelby Cnty Judge of Probate, AL
08/17/2015 01:30:39 PM FILED/CERT

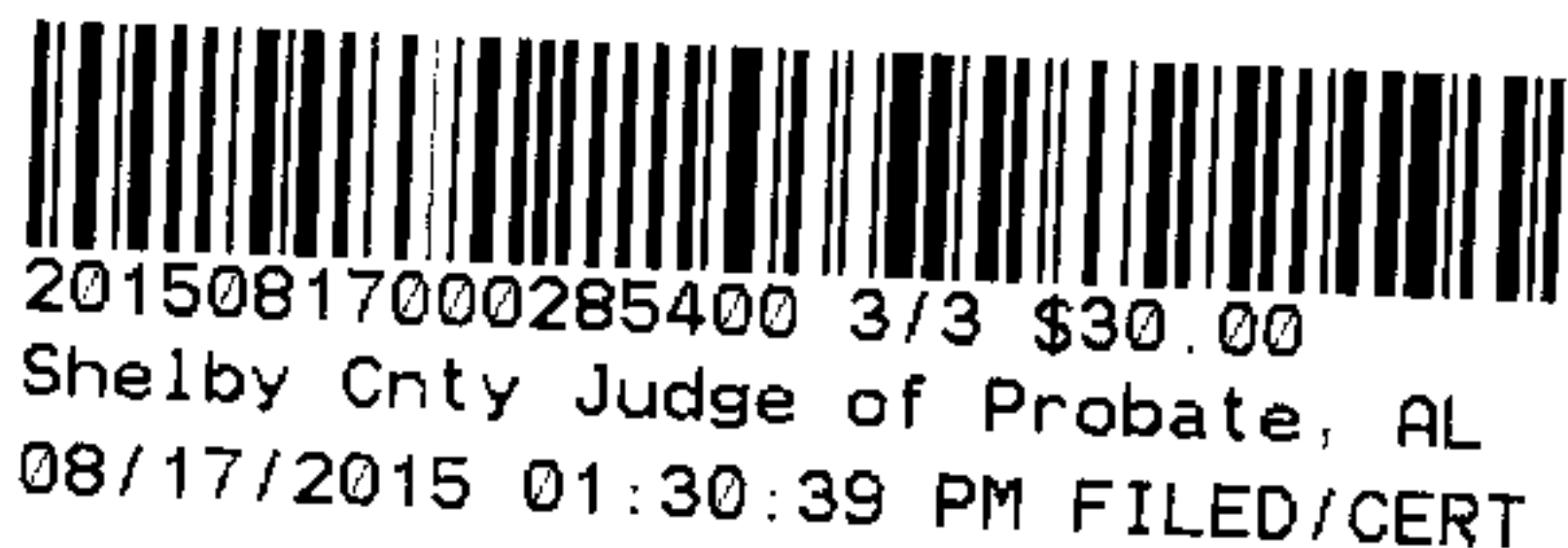
Catherine M. Donald

Catherine Molchan Donald
State Registrar of Vital Statistics

REAL ESTATE SALES VALIDATION FORMS

THIS DOCUMENT MUST BE FILED IN ACCORDINACE WITH CODE OF ALABAMA 1975, SECTION 40-22-1

GRANTOR NAME(S): V.L. Wood
MAILING ADDRESS: 2195 Smokey Road
Alabaster, AL 35007
PROPERTY ADDRESS: 117 Cambridge Point



GRANTEE NAME(S): Wood Living Trust, dated 3/2/2006
MAILING ADDRESS: 2195 Smokey Road
Alabaster, AL 35007
DATE OF SALE: 8/10/2015
TOTAL PURCHASE PRICE: \$ 10,000.00
OR
ACTUAL VALUE: \$ _____
OR
ASSESSOR'S MARKET VALUE \$ _____

The purchase price or actual 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

☐ Appraisal
☐ Other _____

If the conveyance document presented for recordation contains all of the required information referenced above, the filing of this form is not required.

INSTRUCTIONS

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 license 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 responsibility of valuing property for property tax purposes will be used and the taxpayer will be panelized pursuant to *Code of Alabama 1975 § 40-22-1 (h)*.

I 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: 8/10/2015

Unattested
(verified by)

Print: V.L. Wood
Sign: 
(Grantor/Grantee/Owner/Agent)