

Recording requested by,)
When recorded return to:)
Name: prepared by E. ELina)
Firm/Company: American Home Title)
Address: 4501 Charlotte Park Dr)
Address 2: Ste 120)
City, State, Zip: Charlotte, NC 28217)
Phone: 866-379-0090)
GF# 200836577AL)
20201026000485190
10/26/2020 08:53:06 AM
AFFID 1/3

-----Above This Line Reserved For Official Use Only-----

AHTL-200836577AL

AFFIDAVIT OF DEATH - JOINT TENANT

STATE OF Alabama
COUNTY OF Shelby

Rebecca Grevas of legal age, being first duly sworn, deposes and says:

1. That Theodore Grevas, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Theodore Grevas named as one of the parties in that certain Warranty Deed dated 02/13/2016, executed by Anthony Taylor Rust to Theodore Grevas and Rebecca Grevas, as tenants by the entirety, recorded as Instrument No. 20160223000055270 on 02/23/2016 in the Office of the County Recorder of the County of Shelby, Alabama, covering the following described property situated in the said County, State of Alabama:
2. That the value of all real and personal property owned by said decedent at date of death, including the full value of the property above described, did not then exceed the sum of \$ _____.

FURTHER AFFIANT SAYETH NOT.

Rebecca Grevas

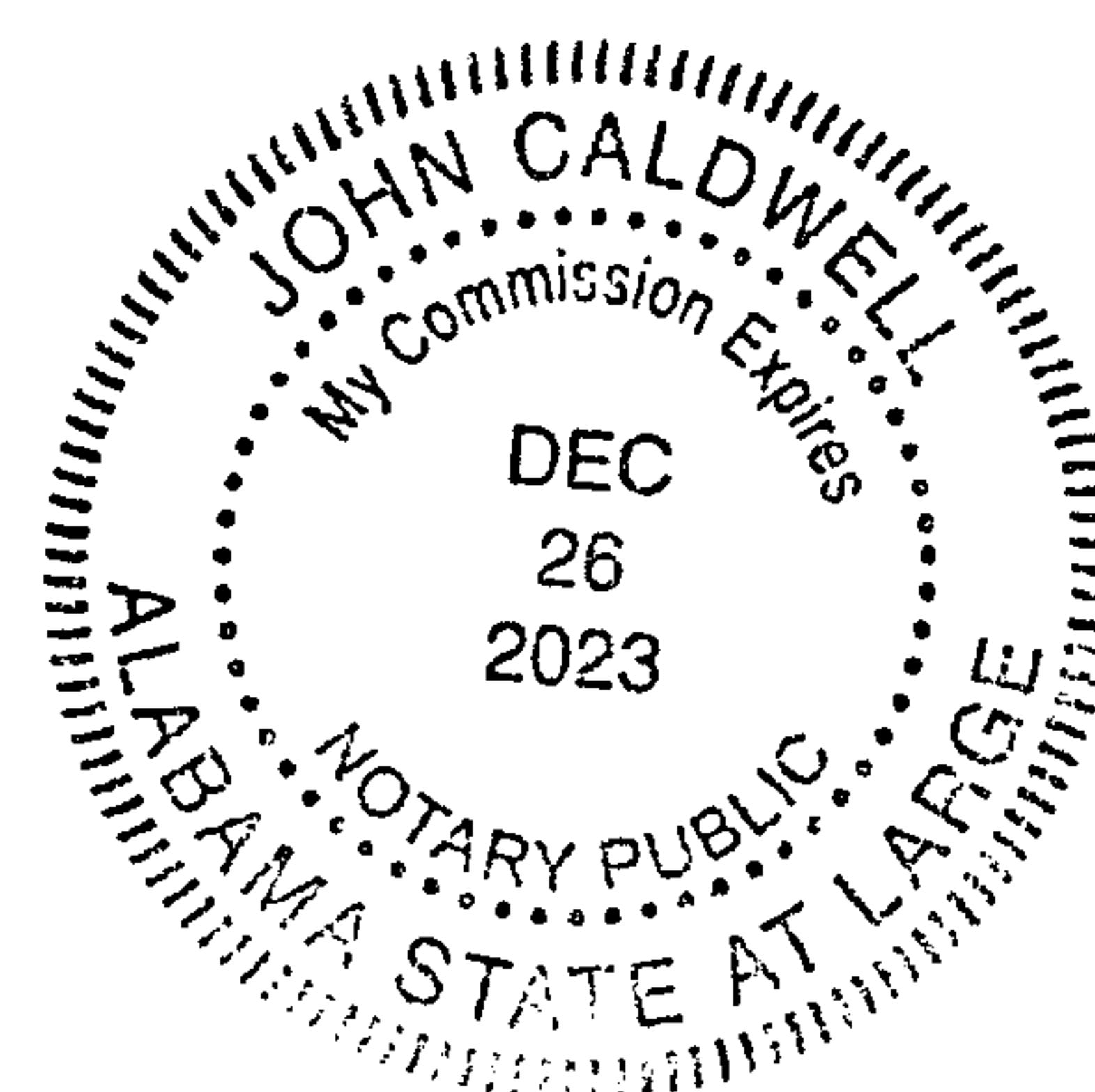
AFFIANT

Subscribed and Sworn to before me this 15 day of October, 2020

John Caldwell

Notary Public Commissioned for said County and State

John Caldwell
My Commission Expires
12/26/2023



20201026000485190 10/26/2020 08:53:06 AM AFFID 2/3

Exhibit A

THE LAND REFERRED TO HEREIN BELOW IS SITUATED IN THE COUNTY OF SHELBY, STATE OF ALABAMA, AND IS DESCRIBED AS FOLLOWS:

Lot 4, according to the Survey of Chesser Plantation, Phase 1, Sector 2, as recorded in Map Book 33, Page 121, in the Probate Office of Shelby County, Alabama.

Parcel ID:09 5 22 0 009 004.000

Commonly known as 140 Scarlet Ln, Chelsea, AL 35043
However, by showing this address no additional coverage is provided

Source of Title Deed Instrument: 20160223000055270 .

THE FRONT OF THIS DOCUMENT IS PINK - THE BACK OF THIS DOCUMENT IS BLUE AND HAS AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

ALABAMA
Center for Health Statistics
ALABAMA CERTIFICATE OF DEATH State File Number 101 2017-19547

1. DECEASED LEGAL NAME Theodore G Grevas				2. DATE AND TIME OF DEATH May 17, 2017 2255																																		
3. ALIAS NAME(IF ANY) None Given				4. DATE AND TIME PRONOUNCED DEAD																																		
5. COUNTY OF DEATH Shelby		6. CITY, TOWN OR LOCATION OF DEATH AND ZIP CODE Chelsea, 35043		7. PLACE OF DEATH 140 Scarlet Lane																																		
8. SEX Male		9. LAST NAME PRIOR TO FIRST MARRIAGE Grevas		10. SERVED IN ARMED FORCES No																																		
11. AGE 75	UNDER 1 YEAR MONTHS	UNDER 1 DAY DAYS	HRS MINS	12. DATE OF BIRTH Jul 10, 1941	13. BIRTHPLACE (State or Foreign Country) Illinois																																	
15. MARITAL STATUS Married		16. SURVIVING SPOUSE NAME PRIOR TO FIRST MARRIAGE Rebecca Pugh		17. RESIDENCE STATE Alabama																																		
18. RESIDENCE COUNTY Shelby		19. CITY, TOWN OR LOCATION AND ZIP CODE Chelsea, 35043		20. STREET ADDRESS 140 Scarlet Lane																																		
21. INFORMANT NAME, RELATIONSHIP AND ADDRESS Rebecca Grevas, Wife, 140 Scarlet Lane, Chelsea, AL 35043																																						
22. FATHER/PARENT NAME PRIOR TO FIRST MARRIAGE James Grevas			23. MOTHER/PARENT NAME PRIOR TO FIRST MARRIAGE Helen																																			
24. DISPOSITION OF BODY Burial		25. CEMETERY OR CREMATORIAL Pinelawn Gardens		26. LOCATION Columbiana, Alabama																																		
27. DATE OF DISPOSITION May 20, 2017	28. FUNERAL DIRECTOR Christopher Griffith		29. LICENSE NUMBER		30. DATE SIGNED May 25, 2017																																	
31. FUNERAL HOME NAME AND ADDRESS Bolton Funeral Home, 207 Highway 47 South, Columbiana, AL 35051																																						
32. LICENSE NUMBER																																						
33. MEDICAL CERTIFICATION: <input checked="" type="checkbox"/> CERTIFYING PHYSICIAN <input type="checkbox"/> MEDICAL EXAMINER <input type="checkbox"/> CORONER																																						
34. NAME Amy Stubbs MD				35. LICENSE NUMBER 30096	36. DATE SIGNED May 24, 2017																																	
37. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH 245 Cahaba Valley Parkway, Suite 110, Pelham, Alabama 35124																																						
38. REGISTRAR Catherine Molchan Donald				39. DATE FILED May 25, 2017																																		
CAUSE OF DEATH																																						
40. PART I. DISEASES, INJURIES OR COMPLICATIONS THAT CAUSED DEATH																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">IMMEDIATE CAUSE</td> <td colspan="2">A. <u>Malignant neoplasm of unspecified part of unspecified bronchus or lung</u></td> <td colspan="2">INTERVAL</td> </tr> <tr> <td colspan="2"></td> <td colspan="2">DUE TO (OR AS A CONSEQUENCE OF):</td> <td colspan="2">Unknown</td> </tr> <tr> <td rowspan="4" style="writing-mode: vertical-rl; transform: rotate(180deg);">UNDERLYING CAUSE</td> <td colspan="2">B.</td> <td colspan="2"></td> <td></td> </tr> <tr> <td colspan="2">DUE TO (OR AS A CONSEQUENCE OF):</td> <td colspan="2"></td> <td></td> </tr> <tr> <td colspan="2">C.</td> <td colspan="2"></td> <td></td> </tr> <tr> <td colspan="2">DUE TO (OR AS A CONSEQUENCE OF):</td> <td colspan="2"></td> <td></td> </tr> </table>						IMMEDIATE CAUSE		A. <u>Malignant neoplasm of unspecified part of unspecified bronchus or lung</u>		INTERVAL				DUE TO (OR AS A CONSEQUENCE OF):		Unknown		UNDERLYING CAUSE	B.					DUE TO (OR AS A CONSEQUENCE OF):					C.					DUE TO (OR AS A CONSEQUENCE OF):				
IMMEDIATE CAUSE		A. <u>Malignant neoplasm of unspecified part of unspecified bronchus or lung</u>		INTERVAL																																		
		DUE TO (OR AS A CONSEQUENCE OF):		Unknown																																		
UNDERLYING CAUSE	B.																																					
	DUE TO (OR AS A CONSEQUENCE OF):																																					
	C.																																					
	DUE TO (OR AS A CONSEQUENCE OF):																																					
41. PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH																																						
42. MANNER OF DEATH Natural Causes		43. PREGNANT (IF FEMALE)	44. AUTOPSY Unk	45. FINDINGS CONSIDERED Unk	46. TOXICOLOGY Unk	47. FINDINGS CONSIDERED Unk	48. TOBACCO USE CONTRIBUTED TO DEATH Unknown																															
49. HOW INJURY OCCURRED																																						
50. DATE AND TIME OF INJURY		51. INJURY AT WORK		52. IF TRANSPORTATION INJURY, SPECIFY																																		
53. PLACE OF INJURY		54. LOCATION OF INJURY																																				

ADPH HS E2/REV 01-16

This is an official certified copy of the original record filed in the Center of Health Statistics, Alabama Department of Public Health, Montgomery, Alabama. 2017-286-029-5

June 7, 2017



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
10/26/2020 08:53:06 AM
\$29.00 CHERRY
20201026000485190

Auntie S. Bay

Catherine M. Donald
Catherine Molchan Donald
State Registrar of Vital Statistics