Prepared By and Return To: Deena Pfenning Nations Direct Title Agency, LLC 110 Integra Breeze Lane, Suite 1B Daytona Beach, FL 32117 877.236.2973

20211103000531760 11/03/2021 08:26:47 AM AFFID 1/2

AFFIDAVIT OF CONTINUOUS MARRIAGE.

STATE OF ALABAMA

COUNTY OF SHELBY

BEFORE ME, the undersigned authority, on this $\frac{2l^{3+}}{2l}$ day of $\frac{2l^{3+}}{2l^{3+}}$, 20 $\frac{2l}{2l}$, personally appeared Ruth L. Dennis, who being duly sworn, deposes and says:

1. THAT Affiant along with Affiant's spouse, David Dennis, obtained title to the following described property on 7/23/2007:

Lot 975 according to the Survey of Waterford Highlands Sector 4 Phase 2, as recorded in Map Book 36, Page 15 A & B, in the Probate Office of Shelby County, Alabama.

Address: 2034 Highview Way, Calera, AL 35040

- 2. THAT Affiant was married to the above named spouse prior to the date of acquisition of the aforesaid property, and they remained continuously married from that date up to and including, the date of death of said spouse.
- THAT Affiant's spouse died of natural causes on 5/31/2018 in Shelby County, Atabama.
- 4. That all Federal and State taxes on the Estate of the decedent have been paid in full.
- 5. That a certified copy of the death certificate is attached hereto.
- That Affiant has not, since remarried.

FURTHER THE AFFIANT, SAYETH NOT.

DATED this $\frac{2^{l}}{2}$ day of $\frac{2^{l}}{202!}$.

Sworn to and Subscribed before me this <u>Alstan</u> day of <u>October</u>, 20<u>4</u>, by Ruth L. Dennis, is personally known to me or who has produced as identification.

Typed Name: Debra E. Holston

Title or Parler "

Title or Rank: Notary Public

My Commission #:

8-18-2024 Expires:

"特殊上湖

ANY ALTERATIONS VOID THIS DOCUMENT

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

Center for Health Statistics
LABAMA CERTIFICATE OF DEATH 101 2018-21724

			CAL MATERIAL NUMBER	
1. DECEASED LEGAL NAME	<u></u>			2. DATE AND TIME OF DEATH
David William Dennis	· · · · · · · · · · · · · · · · · · ·		_ = ·	May 28, 2018 2125
3. ALIAS NAME(IF ANY)				4. DATE AND TIME PRONOUNCED DEAD
None Given			· • • • • • • • • • • • • • • • • • • •	
	TOWN OR LOCATION OF DEATH	AND ZIP CODE	7. PLACE OF DEATH	
)	ra, 35040		2034 Highview Way	l'allie, av par a communità della communita della communità della communità della communità della communita della communita della communità della communita de
8, SEX	NAME PRIOR TO FIRST MARRIAG	職 · Table · Andrew		10. SERVED IN ARMED FORCES
Male			·	No
	INS	13. BIRTHPLA	CE (State or Foreign Country)	14. SOCIAL SECURITY NUMBER
80	Oct 2, 1937	Ohio	· · · · · · · · · · · · · · · · · · ·	
i"	POUSE NAME PRIOR TO FIRST MA	RRIAGE	=	17. RESIDENCE STATE
	se Simpson	The second se		Alabama
	Y, TOWN OR LOCATION AND ZIP		TREET ADDRESS	
	era, 35040	2	034 Highview Way	
21. INFORMANT NAME, RELATIONSHIP AND A	•	, , ,		
Ruth Dennis, Wife, 2034 High				
22. FATHER/PARENT NAME PRIOR TO FIRST M	ARRIAGE		ARENT NAME FRIOR TO FIRST	MARINACIE
William Halbert Dennis.			G Worley	
المراجع في المراجع في المراجع في المراجع في	DR CREMATORY		- 26. LOCATION	All the control of th
فكالكاكر فيزان بربرس مستحد مستخب فالقارات أوفي الكال الكران المستحد والمستخب والمشرف فيتمان والمرابس والمستحد	Civiliauniy	The Art) در التقاول الذي التحديد و المستحدة التقاول بين من من التحديد و التحديد التحديد التحديد التحديد و ا
27. DATE OF DISPOSITION 28. FUNERAL DIS			29. LICENSE NUMBER	
May 30, 2018 Ethelyn R	Lusain	-		Jun 4, 2018
31. FUNERAL HOME NAME AND ADDRESS	ر مراجع من المستعدد ال			32. LICENSE NUMBER
W E Lusain Funeral Home, 62	9 Goldwire Way SW, I			
MEDICAL CERTIFICATION	JN: X_CERTIFYING PH	YSICIAN ME		CORONER
34. NAME	T ₁		35, LICENSE NUMBER	
James H Frey MD 37. ADDRESS OF PERSON WHO COMPLETED CA	LISE OF DEATH		11871	Jun 4, 2018
and the second of the second o			· · · · · · · · · · · · · · · · · · ·	
1400 Urban Center Drive Ste 2	40, Birmingnam, Alab	ama 35242		39. DATE FILED
	,	7	•	h
Nicole Henderson Rushing			<u>. </u>	Jun 5, 2018
40. PART I. DISEASES, INJURIES OR COMPLICAT		E OF DEATH		INTERVAL
IMM PDIATE			•	
CAUSE A COPD with acute exacert DUE TO (OR AS A CONSEQUEN		· · · · · · · · · · · · · · · · · · ·	iled and Recorded	Unknown
			fficial Public Records	
B. Butto TO to D. A. C. CONCEDENTED			udge of Probate, Shelby County Alab lerk	pama, County
DUE TO (OR AS A CONSEQUEN			helby County, AL 1/03/2021 08:26:47 AM	
DUE TO (OR AS A CONSEQUEN		\\ <u></u> \	25.00 JOANN 0211103000531760	<u> </u>
	The state of the s	JAHNNI .	0211102000021700	0.4 1
L D. 41. PART II. OTHER SIGNIFICANT CONDITIONS	CONTRIBUTING TO DEATH			allis. Bush
			ا المنظم الم المنظم المنظم المنظ	
42. MANNER OF DEATH = 4.1	PHEGNANT (IF FEMALE)		FINDINGS 46. TOXICOLOGY	47. FINDINGS 48. TOBACCO USE
Natural Causes			NSIDERED	CONSIDERED CONTRIBUTED TO DEATH Unknown
49. HOW INJURY OCCURRED		・ 大き 「一つ」 「「「「「「「「」」」 「「「「」」」 「「「「」」」 「「「」」」 「「「」」」 「「」」」 「「」」 「「」」 「「」」 「「」」 「「」」 「「」」 「「」」 「「」」 「「」」 「「」」 「「」」 「「」」 「「」」 「」	1 NO	CALITATOVAL
50. DATE AND TIME OF INJURY	51. INJURY AT WO	RK 52.	F TRANSPORTATION INJURY, S	PECIFY
· · · · · · · · · · · · · · · · · · ·				
53. PLACE OF INJURY	54, LOCATION OF	INJURY	<u> </u>	
		* ·		ADPH HS E2/REV 01-16
and the second of the second o	•	$0 = \frac{1}{2} \left(\frac{1}{2} \right)^{-1}$	· · · · · · · · · · · · · · · · · · ·	The second secon

This is an official certified copy of the original record filed in the Center of Health Statistics, Alabama Department of Public Health, Montgomery, Alabama. 2018-285-894-1