



20211206000580280 1/7 \$1319.00
Shelby Cnty Judge of Probate, AL
12/06/2021 11:58:57 AM FILED/CERT

THIS DEED WAS PREPARED WITHOUT BENEFIT OF A TITLE SEARCH

This document prepared by:)
Carney Dye, LLC)
PO Box 43647)
Birmingham, Alabama 35243)
(205) 802-0696)
)
)
STATE OF ALABAMA)
SHELBY COUNTY)

Send tax notice to:

Deborah Franks, Trustee
501 Cahaba Farms Drive
Indian Springs, Alabama 35124

- Above This Line Reserved for Official Use -

QUITCLAIM DEED

KNOW ALL MEN BY THESE PRESENTS THAT:

FOR VALUABLE CONSIDERATION OF TEN DOLLARS (\$10.00), and other good and valuable consideration, cash in hand paid, the receipt and sufficiency of which is hereby acknowledged, **Deborah Franks, an unmarried woman**, hereinafter referred to as "Grantor," does hereby grant, convey and warrant unto, **Deborah Franks, as Trustee of the Deborah Church Franks Management Trust dated August 31, 2018**, hereinafter referred to as "Grantee," all of the right, title, and interest in the following land and property, together with all improvements located thereon, lying in the County of Shelby, State of Alabama, to-wit:

Lot 9 according to the Survey of Cahaba Valley Farms, a single family residential, estate lot subdivision, as recorded in Map Book 15 page 36 in the Probate Office of Shelby County, Alabama; being situated in Shelby County, Alabama.

Subject to:

1. 2021 ad valorem taxes not yet due and payable;
2. Restrictions, covenants and conditions as set out in instrument(s) recorded in Real 245 page 293 in Probate Office;
3. Transmission Line Permit(s) to Alabama Power Company as shown by instrument(s) recorded in Deed Book 133 page 170 in Probate Office; and
4. Restrictions, limitations and conditions as set out in Map Book 15 page 36.



**CERTIFICATION OF TRUST OF THE DEBORAH CHURCH FRANKS
MANAGEMENT TRUST AGREEMENT DATED AUGUST 31, 2018**

This Certification of Trust is made pursuant to Code of Alabama §19-3B-1013 as follows:

1. The Trust is currently effective and is dated August 31, 2018.
2. The Grantor of the Trust is Deborah Church Franks.
3. The Trust may only be revoked by the Grantor.
4. The Trust has not been revoked, modified, or amended in any manner that would cause the representations contained in this Certification of Trust to be incorrect.

5. The Tax Identification number for the Trust is the Grantor's social security number.

6. The current Trustee is:

Deborah Church Franks
501 Cahaba Farms Drive
Indian Springs, AL 35124

7. Article XI of said Trust sets forth the powers of the Trustee. The Trustee has broad power to manage the assets of the Trust, including the right to sell real or personal property in the name of the Trust.

8. The Trustee is authorized to open accounts, sign checks, make withdrawals or to make deposits on any accounts at any financial institution.

9. Title to trust property may be listed as: "Deborah Church Franks as Trustee of the Deborah Church Franks Management Trust Agreement."

10. A person who acts in reliance upon this Certification of Trust, without actual knowledge that any representations contained have become incorrect, is not liable to any other person for so acting. A person who does not have actual knowledge that facts contained in this Certification of Trust are incorrect may assume, without inquiry, the existence of facts. Actual knowledge shall not be inferred solely from the fact that a copy of all or part of the trust instrument is held by the person relying upon this Trust Certification. Any transaction, and any lien created thereby, entered into by the Trustee and a person acting in reliance upon this Certification of Trust shall be enforceable against the Trust assets; except that if the person has actual knowledge that the Trustee is acting outside the scope of the Trust, then the transaction is not enforceable against the Trust assets. Nothing contained herein shall limit the rights of the beneficiaries of the Trust against the Trustee.



11. Any third party may rely upon the representations made in this Certification of Trust until the third party has received actual notice to the contrary.

IN WITNESS WHEREOF, I have executed this Certification of Trust this the 18th day of November, 2021 and hereby affirm it constitutes a valid and accurate certification of such document.

Deborah Church Franks
DEBORAH CHURCH FRANKS, TRUSTEE

STATE OF Alabama)

COUNTY OF Jefferson)

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

Given under my hand and official seal this the 18th day of November, 2021.

Jim Key Bouyer
(Signature of Person Taking
Acknowledgment)



My commission expires: 07/25/2024



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STATE OF ALABAMA)
COUNTY OF SHELBY)

Affidavit of Surviving Spouse Joint Tenant

Now on this 18th day of November, 2021, I, Deborah Franks, of lawful age, being duly sworn, state as follows:

On the 20th, of December, 2017, this interest was conveyed by document to James B. Franks and Deborah Franks the following real property situated in Shelby County, Alabama, via Quitclaim Deed, Joint Tenants with Right of Survivorship, with the following legal description:

Lot 9 according to the Survey of Cahaba Valley Farms, a single family residential, estate lot subdivision, as recorded in Map Book 15 page 36 in the Probate Office of Shelby County, Alabama; being situated in Shelby County, Alabama.

with a mailing address of 501 Cahaba Farms Drive, Indian Springs, Alabama 35124.

The Quitclaim Deed with Right of Survivorship was recorded in instrument number 20180124000022980 in the Office of the Judge of Probate on the 24th day of January, 2018.

Attached hereto is a certified copy of the Death Certificate of James B. Franks, deceased, issued by the Department of Health for the State of Alabama showing that the deceased Joint Tenant died on the 29th day of June, 2018.

Affiant further states that she is the surviving joint tenant in the described property, and that the decedent named in the certificate of death is one and the same person as the joint tenant in the deed recorded as identified above.

Affiant further states that on the date of deceased joint tenant's death the two were married to each other that that affiant is the surviving spouse.

And further affiant saith not.

Deborah Franks (SEAL)

Subscribed and sworn to before me this 18th day of November, 2021.

Eric Ky Bouyafa
Notary Public

My Commission Expires: 07/23/2024



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ALABAMA
Center for Health Statistics

ALABAMA CERTIFICATE OF DEATH

State File Number

101 2018-26530

| | | | |
|--|--|--|---|
| 1. NAME OF DECEASED James Benton Franks | | 2. DATE AND TIME OF DEATH Jun 29, 2018 2219 | |
| 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 Indian Springs, 35124 | 7. PLACE OF DEATH 501 Cahaba Farms Drive | |
| 8. SEX Male | 9. LAST NAME PRIOR TO FIRST MARRIAGE | 10. SERVED IN ARMED FORCES Yes | |
| 11. AGE 79 | 12. DATE OF BIRTH Mar 4, 1939 | 13. BIRTHPLACE (State or Foreign Country) Alabama | 14. SOCIAL SECURITY NUMBER 424-44-4477 |
| 15. MARITAL STATUS Married | 16. SURVIVING SPOUSE NAME PRIOR TO FIRST MARRIAGE Deborah Sue Church | 17. RESIDENCE STATE Alabama | |
| 18. RESIDENCE COUNTY Shelby | 19. CITY, TOWN OR LOCATION AND ZIP CODE Indian Springs, 35124 | 20. STREET ADDRESS 501 Cahaba Farms Drive | |
| 21. INFORMANT NAME, RELATIONSHIP AND ADDRESS Deborah Franks, Wife, 501 Cahaba Farms Drive, Indian Springs, AL 35124 | | | |
| 22. FATHER/PARENT NAME PRIOR TO FIRST MARRIAGE James Maxwell Franks | | 23. MOTHER/PARENT NAME PRIOR TO FIRST MARRIAGE Dorothy Nell Lewis | |
| 24. DISPOSITION OF BODY Burial | 25. CEMETERY OR CREMATORY Southern Heritage Cemetery | 26. LOCATION Pelham, Alabama | |
| 27. DATE OF DISPOSITION Jul 3, 2018 | 28. FUNERAL DIRECTOR Stephen Ulmer | 29. LICENSE NUMBER | 30. DATE SIGNED Jul 9, 2018 |
| 31. FUNERAL HOME NAME AND ADDRESS Ridout's Southern Heritage, 475 Cahaba Valley Rd, Pelham, AL 35124 | | | 32. LICENSE NUMBER |
| 33. MEDICAL CERTIFICATION: <input checked="" type="checkbox"/> CERTIFYING PHYSICIAN <input type="checkbox"/> MEDICAL EXAMINER <input type="checkbox"/> CORONER | | | |
| 34. NAME David Cherry MD | | 35. LICENSE NUMBER 27049 | 36. DATE SIGNED Jul 6, 2018 |
| 37. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH 619 19th St S WP 915, Birmingham, Alabama 35294 | | | |
| 38. REGISTRAR Nicole Henderson Rushing | | | 39. DATE FILED Jul 10, 2018 |

CAUSE OF DEATH

| | | | | | | | | |
|---|--|-------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---|----------|--|
| 40. PART I. DISEASES, INJURIES OR COMPLICATIONS THAT CAUSED DEATH | | | | | | | INTERVAL | |
| IMMEDIATE CAUSE | A. Unspecified Sequelae of Cerebral Infarction | | | | | | Unknown | |
| | DUE TO (OR AS A CONSEQUENCE OF): | | | | | | | |
| | UNDERLYING CAUSE | B. DUE TO (OR AS A CONSEQUENCE OF): | | | | | | |
| | | C. DUE TO (OR AS A CONSEQUENCE OF): | | | | | | |
| D. 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. 2018-325-747-9

July 10, 2018

Nicole H. Rushing
 Nicole Henderson Rushing
 State Registrar of Vital Statistics

Real Estate Sales Validation Form



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This Document must be filed in accordance with Code of Alabama 1975, §

Grantor's Name Deborah Franks
Mailing Address 501 Cahaba Farms Dr
Indian Springs, AL 35124

Grantee's Name Deborah Franks, Trustee
Mailing Address 501 Cahaba Farms Dr
Indian Springs, AL 35124

Property Address 501 Cahaba Farms Dr
Indian Springs, AL 35124

Date of Sale 11/18/2021
Total Purchase Price \$
or
Actual Value \$
or
Assessor's Market Value \$1,278,970

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 Appraisal
Sales Contract Other
Closing Statement

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 licensed 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 the responsibility of valuing property for property tax purposes will be used and the taxpayer will be penalized 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 12/2/2021

Print Jack T. Carney

Unattested (verified by)

Sign (Grantor/Grantee/Owner/Agent) circle one