Affidavit of Survivorship

State of Alabama

County of Shelby

20240325000080750 1/3 \$28.00

20240325000080750 1/3 \$28.00 Shelby Cnty Judge of Probate, AL 03/25/2024 02:17:37 PM FILED/CERT

I Amy J Hubbard, residing at 136 Blue Spring PL, Alabaster, Alabama 35007, being of legal age, depose and say that:

1. On April 09, 2019, by Survivorship Deed recorded in Book/Volume Map Book 21, Page 55, of the Shelby County records as document number 2019 0429000141370 ('the Deed'), the Affiant and Ruth J. Greathouse become owners of the following legally described property:

The party of the first part, in consideration of \$1, lawful money of the United States, was paid by the party in the second part of this document.

Lot 102, according to the Survey of Summer Brook, Sector 5, Phase 1 as recorded in Map Book 21, page 55 in the Probate Office of Shelby County.

- 2. Affiant and Ruth J. Greathouse own the property in joint tenancy with right of survivorship.
- 3. On April 25, 2023, Ruth J. Greathouse, died, thereby terminating Ruth J. Greathouses interest in the above-described real property. A certified copy of the death certificate of Ruth J. Greathouse is attached hereto as Exhibit A.

Oath or Affirmation

I certify under penalty of perjury under Alabama law that I know the contents of this affidavit signed by me and that the statements are true and correct.

11 ON MCCOURSE

Date

STATE OF ALABAMA, COUNTY OF SHELBY, ss:

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On this 25' day of March, 2024, before me,

1- Chase Richardson, personally appeared Amy J Hubbard, known to me (or satisfactorily proven) to be the persons whose names are subscribed to the within Affidavit, and, being first duly sworn on oath according to law, deposes and says that he/she has read the foregoing Affidavit subscribed by him/her, and that the matters stated herein are true to the best of his/her information, knowledge and belief.

> In witness whereof I hereunto set my hand and official seal.

Notary Public

Branch Specialist 1 Title (and Rank)

My commission expires 10/14/26

This document was prepared by:
Amy J. Habbard
136 Blue Spring PL
Alabasta, Al 35007

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 Number 101 2023-18469

DECEASEDI	DECEASED LEGAL NAME												2. DATE AND TIME OF DEATH			
													Apr 25, 2023 1140			
Johnnye Ruth Greathouse ALIAS NAME(IF ANY)														IME PRONOUN	CED DEAD	
None Giv	ven								· 					<u>.,,,</u>		
6. CITY, TOWN OR LOCATION OF DEATH AND ZIP CODE 7. PLACE OF DEATH												~				
Jefferson Birmingham, 35243								Grandview Medical Center						10. SERVE	DIN	
S. SEX			9. LA.	ST NAME	PRIOR TO	FIRST MARRIA						ARMEI	FORCES			
Female		eathous			<u> </u>	Lia program	ACE (State	e or Fore	ion Country)	<u></u> .	T14. SO	CIAL SECURIT	YNUMBER			
11. AGE	UNDER 1 YE MONTHS	AR DAYS	UNDER 1 DAY 12. DATE OF BIRTH HRS MINS					13. BIRTHPLACE (State or Foreign Country)								
87 Dec 16, 1935								Alabama					17. RESIDENCE STATE			
15. MARITAL S		16.8	UKAIAINC	3 SPOUSE	INVIATE LEGI	OK I O PIROJ MI	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Ala	abama	а		
Never M			110 (CITY TOY	OWN OR LOCATION AND ZIP CODE				20. STREET ADDRESS							
18. RESIDENCE	COUNTY			Alabaster, 35007					136 Blue Spring Place							
Shelby 21. Informan	T NAME, REL	ATION				J/										
						ourt, Alaba	ster /	AL 35007	•					<u></u>		
Amy Hu 22. FATHER/PA	RENT NAME	PRIOR	TO FIRST	MARRIA	GE			23. MOTHE	R/PARENT	NAME	PRIOR TO FIRST	MARRIAGI	E			
						Mary Alice Maubry						<u> </u>				
John Greathouse 24. DISPOSITION OF BODY 25. CEMETERY OR CREMATORY								26. LOCATION								
		Cremate					Calera, Alaba				na					
					ROROTH	ER AGENT			29. LICENSE NUM			30. DATE SIGNED				
Apr 27,	2023	$\Box_{\mathbf{C}}$	odv W	Caldw	ell					58	364			5, 2023		
31. FUNERAL I	HOME NAME	AND A	DDRESS		- - , -	·						3	Z. LICES	NSE NUMBER		
Charter 1	Funeral H	Iome	e and C	Cremat	ory, 25	21 U S Hi	ghway	/ 31, Cale	ra, AL	, 3504	10					
33.															•	
MED	ICAL CE	RTI	FICAT	rion:	Certify	ing Physic	cian					- 1-	CDATE	FEICNED		
34. NAME									35. LICENSE NUMBE							
Michael				<u></u>			38335				Apr 28, 2023					
37. ADDRESS	OF PERSON W															
3690 Gr	y, Birr	mingh	am, Ala	bama 3524	43	<u></u>				[3	9. DATE	E FILED				
38. REGISTRAR												1		5, 2023		
Nicole I	<u>Henderso</u>	n Ru	shing										IVIAY	J, 2025		
	<u> — . — . — . — . — . — . — . — . — .</u>		···-				JSE O	F DEATI	<u>i</u>	<u> </u>	<u> </u>		1	NTERVAL	<u></u>	
40. PART I. DISEASES, INJURIES OR COMPLICATIONS THAT CAUSED DEATH],	Unknown		
IMMEDIATE CAUSE	A Asystole			HIPNOR O			.		8 8 8 1 2 8 1 8 1 1 2	1 8 18 83 6 6		1 2 3 1 1 0 0 1 1 2 0		O III CITA		
DUE TO (OR AS A CONSEQUENCE OF):													 	Unknown		
B. Respiratory Failure DUE TO (OR AS A CONSEQUENCE OF): C. Congestive Heart Failure DUE TO (OR AS A CONSEQUENCE OF):								20240325000080750 3/3 \$28.0					'''			
									Shelby Cnty Judge of Probat					Unknown		
SER S	C. Congestive Heart Failure 03/25/2024 02:17:37 PM FILI										.ED/CERT		<u></u>			
DUE TO (OR AS A CONSEQUENCE OF):													,	Unknown		
41. PART 11. C	D, Aspiratio	on Pn	CONDITI	a IONS CON	TRIBUTING	G TO DEATH		<u></u>								
AT. LYNK! II'	, 1 111747 PIGILII			_ _ _												
42. MANNER	OF DEATH	···		43. PR	EGNANT (II	F FEMALE)		44. AUTOPS	45. FIND CONSII		46. TOXICOLOGY	47. FIND CONSID	INGS DERED	48. TOBACCO CONTRIBUTI	USE ED TO DEATH	
Natural Causes								Unk	Unk		Unk	Unk		Unknow	'n	
49. HOW INJ		E D														
															<u></u>	
50. DATE AND TIME OF INJURY							WORK	52. IF TRANSPORTATION INJURY				Y, SPECIFY				
								···								
53. PLACE O	FINJURY					54. LOCATION	OF INJU	JRY								
											 _			ADDIL	RS E2/REV 01-2	

ADPH HS E2/REY 01-2

This is an official certified copy of the original record filed in the Center of Health Statistics, Alabama Department of Public Health, Montgomery Alabama. 2023-384-729-2

Nicole Henderson Rushing State Registrar of Vital Statistics