This instrument Prepared By:
Culwell & Ward
1720 Parkway Towers
Nashville, Tn 37219

AFFIDAVIT OF HEIRSHIP

BOOK 9013 PAGE 57

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Paul E. Shown, of Nashville TN, of lawful age, being first duly sworn according to law, on oath says:

That the statements hereinafter set forth, including answers to questions propounded, constitute a true, correct and complete statement of the family history of the person hereinafter named as "decedent' and of the estate of such decedent.

Name of decedent KATHRYN B. SHOWN

Date decedent died Aug 12, 1990. Where? Parkview Medical Center

Did decedent leave a will? YES. If so, has same been probated? YES.

Or has other administration proceedings been had on decedent's estate? NO

If so, when? _____. Where? _____.

Were there any unpaid debts or obligations due by decedent at the time of _____ death? NO. If so give the following information:

To Whom Owing	Amount	Nature of Debt	Paid-Unpaid now

Was decedent surety on any bond at the time of his death? NO

Were there any suits pending, or any judgments rendered in any court, against decedent at the time of _____ death? NO

If so, state briefly the nature, amount involved and parties to the action: _____

_____

_____

_____

_____.

Was decedent married or single at the time of death? WIDOWED

If married, to whom? WILLIAM C. SHOWN SR.

Was decedent every married to any other than above-named person? NO

If so, give the following information: (List names in order of marriage).

Name of Spouse	Living or Dead	Divorced	Date of Death or Divorce

If decedent had any children by any souse, give following information:

Name of Child	Age	Address	Living-Dead	Date Death	By Which Spouse
WILLIAM C. JR.		5109 RAYWOOD LA.	D	11-23-73	
PAUL E. Shown	53	NASH. TN 37211 128 CARROLL TRAIL	L		
MARY KATHRYN Cahill	47	LEWISTOWN MI 59457 5109 RAWOOD LA.	L		
NANCY SHOWN Webb	43	NASH. TN 37211	L		

If a deceased child left descendants, give the following information:

	Name of Child	Age	Address	Living-Dead	Date of Death
WILLIAM C JR. Name of deceased child	CYNTHIA		MISSOULA, MT.	L	
	YVONNE		MADISON, TN	L	
	GRACE RENEE		STANWOOD, WASH.	L	
	BOBBIE JEAN		BILLINGS, MT.	L	
Name of deceased child					
Name of deceased child					

In case decedent left no surviving spouse, and no children or descendants of deceased children, then please furnish the following information:

Name of Parents	Address	Living-Dead	Date of Death
Father			
Mother			

Give names of brothers and sisters of decedent:

Name	Relation	Address	Living-Dead	Date of Death
RUTH HARRELL	SISTER	541 NORTHCREST	L	
NANNIE DOUGLASS	SISTER	541 NORTHCREST	L	

Give names of children of deceased brother or sister:

Name of Child	Child of	Age	Address	Living-Dead

Here briefly state facts and circumstances (such as being a relative of, or attorney or agent for, deceased) which will show basis and source of information hereinbefore given:

I am Decedents' Son.

Paul E. Shaver
Affiant

Subscribed and sworn before me this 9th day of July, 1993.

Gail D. McMillen
Notary Public

My commission expires: 11-26-94

SUPPORTING AFFIDAVIT

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Paul E. Shown being of lawful age, being first sworn, on oath states:

That this affiant was well and personally acquainted with Kathryn B. Shown in her lifetime (being the person described as "decedent" in the Proof hereinabove set forth); that this affiant has read the foregoing Proof of Death and Heirship, knows the contents thereof, and that each and every statement therein contained is true, to the best of his knowledge and belief.

Paul E. Shown
Affiant

Subscribed and sworn to before me this 8th day of July, 1993.

Gail D. McMillen
Notary Public

My Commission Expires: 11-26-94

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FELIX Z. WILSON II REGISTER
DAVIDSON COUNTY, TN
PICK-UP
heirform.cew
IDENTIF. ↑ REFERENCE
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