Davidson County AFFIDAVIT
Recvd: 03/04/05 09:00 2 pgs
Fees:12.00 Taxes:0.00

20050304-0023998

This instrument prepared by:
Paul N. Rudolph, Attorney at Law
222 2nd Ave. N. Ste. 316
Nashville, Tennessee 37201
From information provided by the affiant

AFFIDAVIT OF HEIRSHIP
STATE OF TENNESSEE
DAVIDSON COUNTY

ADDRESS NEW OWNER AS FOLLOWS:	SEND TAX BILLS:	MAP-PARCEL
Roger Kernell 129 Lauren Drive White House, TN 373188	New Owner	Map 34-16 Parcel 4

STATE OF TENNESSEE
COUNTY OF DAVIDSON

The undersigned, being duly sworn, deposes and says:

Pauline Kernell, a resident of ~~Sumner~~ Davidson County, State of Tennessee, who died October 14, 2004, as evidenced by a copy of the death certificate attached as Exhibit A, held a fee simple interest in the following described real estate:

Land in Davidson County, Tennessee, being Lot No. 6 on the Plan of Swinging Bridge Heights, as of record in Book 2854, page 114, Register's Office for Davidson County, Tennessee, as follows:

Said Lot No. 6 fronts 75 feet on the southeasterly side of Keeton Avenue and runs back 124.99 feet on the northeasterly line and 150 feet on the southwesterly line to a dead line which is a broken line on which it measures 82.87 feet.

Being the same property conveyed to James R. Kernell, who died on October 28, 1999, and wife, Pauline Kernell, by Warranty Deed dated August 11, 1976, of record at Book 5057, page 480, Register's Office for Davidson County, Tennessee.

SUBJECT TO Governmental zoning and subdivision ordinances or regulations in effect thereon.

The undersigned received 100% interest in the real estate described above by virtue of the laws of descent and distribution, being the decedent's only heir at law.

Roger Kernell
Roger Kernell

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared **ROGER KERNELL**, the within named bargainor, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that he executed the foregoing instrument for the purposes therein contained as his free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal at my office in said County, on this 23rd day of Feb, 2005

NOTARY PUBLIC
TENNESSEE
DAVIDSON COUNTY

Notary Public
My Commission expires: _____
My Commission Expires NOV. 25, 2006

RECORDERS MEMO
LEGIBILITY OF WRITING, TYPING OR PRINTING IN THIS DOCUMENT UNSATISFACTORY WHEN RECEIVED

METROPOLITAN GOVERNMENT OF
NASHVILLE & DAVIDSON COUNTY
Office of Vital Records

0105678

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER

1. DECEDENT'S NAME (First, Middle, Last): Paulina Karnell
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): October 14, 2004
4. SOCIAL SECURITY NUMBER: 412-38-5092
5a. AGE-LAST BIRTHDAY (Years): 68
6. DATE OF BIRTH (Month, Day, Year): July 17, 1936
7. BIRTHPLACE (City and State or Foreign Country): Gainesborough, Tennessee
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 2 No
9. MARITAL STATUS: 2 Married
10. PLACE OF DEATH (Check only one): 4 Hospice Facility (Name): Alive Hospice
11. FACILITY NAME (If not institution, give street and number): Alive Hospice
12. CITY, TOWN, OR LOCATION OF DEATH: Nashville
13. COUNTY OF DEATH: Davidson
14. SURVIVING SPOUSE (If wife, give maiden name): Widowed
15a. OCCUPATION (Type of work done during most of working life. Do not use retired.): Homemaker
15b. KIND OF BUSINESS/INDUSTRY: Own Home
16a. RESIDENCE-STATE: Tennessee
16b. COUNTY: Davidson
16c. CITY, TOWN, OR LOCATION: Old Hickory
16d. STREET AND NUMBER OR RURAL LOCATION: 101 Warren Drive
16e. INSIDE CITY LIMITS? 1 Yes
16f. ZIP CODE: 37138
17. WAS DECEDENT OF HISPANIC ORIGIN? 2 No
18. RACE: White
19. DECEDENT'S EDUCATION: 12
20. FATHER'S NAME (First, Middle, Last): Raymond Jenkins
21. MOTHER'S NAME (First, Middle, Maiden Surname): Ava Long
22a. INFORMANT'S NAME: Roger Karnell
22b. RELATIONSHIP TO DECEDENT: Son
22c. MAILING ADDRESS: 129 Lauren Drive Whitehouse, Tennessee 37188
23a. METHOD OF DISPOSITION: 1 Burial
23b. PLACE OF DISPOSITION: Hermitage Memorial Gardens
23c. LOCATION: Hermitage, Tennessee
24a. SIGNATURE OF FUNERAL DIRECTOR: Paul Wells
24b. LICENSE NUMBER: 2965
24c. SIGNATURE OF EMBALMER: Alfred E. Knight, III
24d. LICENSE NUMBER: 4936
24e. NAME AND ADDRESS OF FACILITY: Hermitage Funeral Home, 535 Shute Lane, P. O. Box 757, Hermitage, Tennessee 37076
24f. LICENSE NUMBER: 540
25. SIGNATURE OF REGISTRAR
26. DATE FILED: October 25, 2004
27a. SIGNATURE AND TITLE OF CERTIFIER: 1 Certifying Physician
27b. LICENSE NUMBER: 34321
27c. DATE SIGNED: 10-15-04
28a. SIGNATURE AND TITLE OF MEDICAL EXAMINER
28b. LICENSE NUMBER
28c. DATE SIGNED
29. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER): Dr. John Mulder, 1718 Patterson Street, Nashville, Tennessee 37203

PART I. Enter the chain of events, diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line.

IMMEDIATE CAUSE (Final disease or condition resulting in death): → Lung Cancer
DUE TO (OR AS A CONSEQUENCE OF):
DUE TO (OR AS A CONSEQUENCE OF):
DUE TO (OR AS A CONSEQUENCE OF):

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.

30. WAS AN AUTOPSY PERFORMED? 2 No
30b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? 2 No
31. MANNER OF DEATH: 1 Natural
32a. DATE OF INJURY (Month, Day, Year)
32b. TIME OF INJURY
32c. INJURY AT WORK? 2 No
32d. DESCRIBE HOW INJURY OCCURRED
32e. PLACE OF INJURY (Home, farm, street, factory, office building, etc.) (Specify)
32f. LOCATION (Street and Number or Rural Route Number, City or Town, State)

I hereby certify the above to be a true and correct copy of the original document on file in this department. This certified copy is valid only printed on security paper showing the red embossed seal of the Metropolitan Government of Nashville and Davidson County. lation or erasure voids this certification.

Tennessee Code Annotated 68-3-101 et seq., Vital Records Act of 1977.

Tonya Y. Ruttlen
Local Registrar

OCT 25 2004
Date Issued

CERTIFICATION OF VITAL RECORD