Davidson County AFFIDAVIT
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THIS INSTRUMENT WAS PREPARED BY:
BASS BERRY & SIMS, PLC (JCG)
315 DEADERICK STREET, SUITE 2700
NASHVILLE, TN 37238

# AFFIDAVIT OF HEIRSHIP

The affiants, Tonya Harrison, Steig McDonald and Anton McDonald, after first being duly sworn, do hereby state and affirm as follows:

1. Amarintha McDonald (the "Decedent") died intestate on September 29, 2005. A copy of the Decedent's death certificate is attached hereto as Exhibit A.

2. Upon her death, the Decedent resided at 3296 Hinkle Drive, Nashville, Davidson County, Tennessee, 37218.

3. The following are all of the children ever born to or adopted by the Decedent:

(a) Tonya Harrison, adult, presently residing at 40 Gardiner Street, Darien, Connecticut, 06820.

(b) Anton McDonald, adult, presently residing at 3296 Hinkle Drive, Nashville, Tennessee, 37218.

(c) Steig McDonald, adult, presently residing at 1416 Breckinridge Court, Whites Creek, Tennessee, 37189.

This affidavit is freely given pursuant to Tennessee Code Annotated § 30-2-712 to help establish and reflect the heirship with respect to the property owned by the Decedent at her death, including the real property more specifically described on Exhibit B attached hereto.

FURTHER THE AFFIANTS SAITH NOT.

DATED: 12/05, 2005

COUNTY OF Fairfield )
STATE OF Connecticut )

Tonya P. Harrison

Tonya Harrison

Sworn to and subscribed before me, this 5 day of December, 2005.

Notary Public

My Commission Expires: _____

OFFICIAL SEAL
Notary Public, Connecticut
DEE FRANCIS-RAFFINGTON
Fairfield County
My Commission Expires [illegible] 2008

COUNTY OF Davidson )
STATE OF TN )

Steig McDonald

Sworn to and subscribed before me, this 10 day of December, 2005.

Notary Public

My Commission Exp. Jan. 24, 2009

My Commission Expires: _____

GREGORY ROBINSON
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY, TN

COUNTY OF Davidson )
STATE OF TN )

Anton McDonald

Sworn to and subscribed before me, this 10 day of December, 2005.

Notary Public

My Commission Expires: My Commission Exp. Jan. 24, 2009

GREGORY ROBINSON
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY, TN

# STATE OF TENNESSEE
## Office of Vital Records

0505484

TENNESSEE DEPARTMENT OF HEALTH
## CERTIFICATE OF DEATH

STATE FILE NUMBER: 2005 043334

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

| | |
|---|---|
| 1 DECEDENT'S NAME (First, Middle, Last) | Amarintha C McDonald |
| 2 SEX | Female |
| 3 DATE OF DEATH (Month, Day, Year) | September 29, 2005 |
| 4 SOCIAL SECURITY NUMBER (If Deceased) | 411-56-7622 |
| 5a AGE (LAST BIRTHDAY) (Yrs.) | 68 |
| 6 DATE OF BIRTH (Month, Day, Year) | Sept 16, 1937 |
| 7 BIRTHPLACE (City and State or Foreign Country) | Nashville, Tennessee |
| 8 WAS DECEDENT EVER IN U.S. ARMED FORCES? | No |
| 8a PLACE OF DEATH (Check one) | Other (Specify) 8 |
| 9a FACILITY NAME (If not institution, give street and number) | Alive Hospice 930 |
| 9c CITY, TOWN, OR LOCATION OF DEATH | Nashville 1094 |
| 9d COUNTY OF DEATH | Davidson 19 |
| 10 MARITAL STATUS (Married, Never Married, Widowed, Divorced (Specify)) | Divorced |
| 11 SURVIVING SPOUSE (If wife, give maiden name) | |
| 12a DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.) | Management |
| 12b KIND OF BUSINESS/INDUSTRY | State of Tennessee |
| 13a RESIDENCE STATE | Tennessee |
| 13b COUNTY | Davidson |
| 13c CITY, TOWN OR LOCATION | Nashville |
| 13d STREET AND NUMBER OR RURAL LOCATION | 3296 Hinkle Drive |
| CENSUS TRACT | |
| 13e INSIDE CITY LIMITS? | Yes |
| 13f ZIP CODE | 37218- |
| 14 WAS DECEDENT OF HISPANIC ORIGIN? (Specify if yes) | No |
| 15 RACE (American Indian, Black, White, etc.) (Specify) | Black |
| 16 DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12) / College (1-4 or 5+) | |
| 17 FATHER'S NAME (First, Middle, Last) | (Unknown) |
| 18 MOTHER'S NAME (First, Middle, Maiden Surname) | Lenola E Pierce |
| 19a INFORMANT'S NAME (Type/Print) | Steig McDonald |
| 19b RELATIONSHIP TO DECEASED | Son |
| 19c MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code) | 1416 Breckenridge Drive Whites Creek, |
| 20a METHOD OF DISPOSITION | Burial |
| 20b PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) | Greenwood North |
| 20c LOCATION (City or Town, State) | Goodlettsville, Tennessee |
| 21a SIGNATURE OF FUNERAL DIRECTOR | Michael A Lewis |
| 21b LICENSE NUMBER OF FUNERAL DIRECTOR | 4703 |
| 21c SIGNATURE OF EMBALMER | Delmas Bogus |
| 21d LICENSE NUMBER OF EMBALMER | 3687 |
| 22a NAME AND ADDRESS OF FUNERAL HOME | Lewis & Wright Funeral Directors<br>2500 Clarksville Hwy, Nashville, Tennessee 37208-1060 |
| 22b LICENSE NUMBER OF FUNERAL HOME | 0812 |
| 23 REGISTRAR'S SIGNATURE | [signature] |
| 24 DATE FILED (Month, Day, Year) | October 5, 2005 |
| 25a CERTIFICATION: To the best of my knowledge, death occurred at the date and place, and due to the cause(s) and manner as stated. SIGNATURE AND TITLE OF PHYSICIAN | [signature] MD |
| 25b LICENSE NUMBER | 37615 |
| 25c DATE SIGNED (Month, Day, Year) | 10/4/2005 |
| 26a MEDICAL EXAMINER: On the basis of examination and/or investigation, in my opinion, death occurred at the date and place, and due to the cause(s) and manner as stated. SIGNATURE AND TITLE OF MEDICAL EXAMINER | |
| 26b LICENSE NUMBER | |
| 26c DATE SIGNED (Month, Day, Year) | |
| PHYSICIAN OR MEDICAL EXAMINER EXECUTING CERTIFICATE MUST COMPLETE AND SIGN MEDICAL CERTIFICATION WITHIN | |
| 27 NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print) | Dr James Bridges 1710 Patton ST Nashville, TN 37203 |

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 when printed on security paper showing the red embossed seal of the Department of Health. Alteration or erasure voids this certification.

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

Sharon M. Leinbach
STATE REGISTRAR

Date Issued Jan-03-2006

THE GREAT SEAL OF THE STATE OF TENNESSEE XVI AGRICULTURE COMMERCE 1796

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD

**Exhibit B**

A certain tract or parcel of land in Davidson County, State of Tennessee, described as follows: to-wit:

Land in Davidson County, Tennessee, being Lot No. 7 on the Plan of Bordeaux Hills, Section 4, as or record in Book 3600, page 49, Register's Office for said County.

Said Lot no. 7 fronts 50.0 feet on the northerly side of Hinkle Drive and extends back 132.45 feet on the easterly line and 110.0 feet on the west line to a dead line in the rear measuring 76.61 feet thereon.

Being the same property conveyed to Amarintha C. McDonald by deed from Terry Burch and wife, Barbara Burch, of record in Book 4562, page 932, Register's Office for Davidson County, Tennessee

Being further described as parcel number 08008027400.