This Instrument Prepared by:

Mary C. LaGrone, Esq.
234 Fourth Avenue North, Suite 300
Nashville, Tennessee 37219
(615) 242-6767

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)
The actual consideration or value whichever is greater, for this transfer is $__-0-__ and exempt from the transfer tax according to T.C.A. §67-4-409.

Narendra Pandya

Narendra Pandya, Affiant
Heir of the Estate of Urmila Pandya

Davidson County AFFIDAVIT
Recvd: 04/11/07 13:29 3 pgs
Fees:17.00 Taxes:0.00
20070411-0043420

Subscribed and sworn to before me, this the 10th day of April, 2007.

Valarie A. Nolen

NOTARY PUBLIC

My Commission expires: 1-28-08

VALARIE A. NOLEN NOTARY PUBLIC AT LARGE DAVIDSON COUNTY, TENN.

My Commission Expires JAN. 28, 2008

AFFIDAVIT OF HEIRSHIP

FROM: **URMILA PANDYA, DECEASED**

TO: **NARENDRA PANDYA, HEIR-AT-LAW and SURVIVING SPOUSE**

PROPERTY: 309 OAK HIGHLAND COURT
ANTIOCH, TN 37013

DOCUMENT: DB-20000301 0020023

MAP: **PL-00006900 0000435**

PARCEL ID NO.: **173040A05400CO**

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Narendra Pandya, being first duly sworn, deposes as follows:

1. The Affiant is a citizen and resident of Davidson County, Tennessee;

2. This affidavit is made upon the personal knowledge of the Affiant pursuant to the

provisions of TCA § 30-2-712;

3. Urmila Pandya, also known as Umrila Narendrakumar Pandya, died in Nashville, Davidson County, Tennessee, on January 3, 2006, as evidenced by the attached death certificate.

4. The surviving spouse and heir-at-law pursuant to the laws of intestate succession, Narendra H. Pandya, also known as Narendrakumar H. Pandya, is the recipient of the property located at 309 Oak Highland Court, Antioch, Davidson County, Tennessee 37013, described as follows to wit:

> Land in Davidson County, Tennessee. Being Lot No. 54 as shown on the plan of Oak Highlands, of record in Book 6900, page 431-435, Register's office for Davidson County, Tennessee. To which plan reference is hereby made for a more complete description.
>
> Being the same property conveyed to Monique Reeder, unmarried, and Robert H. Reeder and wife America Reeder by Deed from Gerald A. Milgie and wife, Leigh Ann Milgie, of record in Book 9899, page 137, said Register's Office.
>
> Being the same property conveyed to Urmila Pandya by Warranty Deed from Robert H. Reeder and wife, America Reeder, and Monique Reeder, unmarried, of record as Instrument #200003010020023 in said Register's Office.

FURTHER AFFIANT SAYETH NAUGHT on this the 10 day of April, 2007.

Narendra Pandya

Narendra Pandya, Affiant heir at law

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Subscribed and sworn to before me, this the 10th day of April 2007.

Valarie A. Nolen

NOTARY PUBLIC

VALARIE A. NOLEN NOTARY PUBLIC AT LARGE DAVIDSON COUNTY, TENN.

My Commission expires: 1-26-08

My Commission Expires JAN. 26, 2008

METROPOLITAN GOVERNMENT OF NASHVILLE & DAVIDSON COUNTY
Office of Vital Records

06-000007

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last)	2. SEX	3. DATE OF DEATH (Month, Day, Year)
Urmilaben Narendra Pandya	Female	January 3, 2006

4. SOCIAL SECURITY NUMBER (of Deceased)	5a. AGE LAST BIRTHDAY (Years)	5b. UNDER 1 YEAR MOS. / DAYS	5c. UNDER 1 DAY HOURS / MIN.	6. DATE OF BIRTH (Month, Day, Year)	7. BIRTHPLACE (City and State or Foreign Country)
415-31-1535	59			June 28, 1946	India

8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 [ ] Yes 2 [X] No

9a. PLACE OF DEATH (Check only one)
HOSPITAL: 1 [ ] Inpatient 2 [ ] ER/Outpatient 3 [ ] DOA
OTHER: 4 [ ] Nursing Home 5 [X] Residence 8 [ ] Other (Specify)

9b. FACILITY NAME (If not institution, give street and number)	9c. CITY, TOWN, OR LOCATION OF DEATH	9d. COUNTY OF DEATH
309 Oak Highland Court	Antioch	Davidson

10. MARITAL STATUS-Married, Never Married, Widowed Divorced (Specify)	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.)	12b. KIND OF BUSINESS/INDUSTRY
Married	Narendra Pandya	Homemaker	Home

13a. RESIDENCE-STATE	13b. COUNTY	13c. CITY, TOWN OR LOCATION	13d. STREET AND NUMBER OR RURAL LOCATION
Tennessee	Davidson	Antioch	309 Oak Highland Court

CENSUS TRACT

13e. INSIDE CITY LIMITS? 1 [X] Yes 2 [ ] No	13f. ZIP CODE	14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No. If yes, specify Cuban, Mexican, Puerto Rican, etc.) Specify, if yes: [ ] Yes [X] No	15. RACE-American Indian, Black, White, etc. (Specify)	16. DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12)	College (1-4 or 5+)
	37013		Hindu		4

PARENTS

17. FATHER'S NAME (First, Middle, Last)	18. MOTHER'S NAME (First, Middle, Maiden Surname)
Shantilal Mehta	Shardaben Pandya

NAME OF DECEDENT (To name by physician or institution)

INFORMANT

19a. INFORMANT'S NAME (Type/Print)	19b. RELATIONSHIP TO DECEASED	19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code)
Narendra Pandya	Husband	309 Oak Highland Court Antioch, Tennessee 37013

DISPOSITION

20a. METHOD OF DISPOSITION 1 [ ] Burial 2 [X] Cremation 3 [ ] Removal from State 4 [ ] Donation 5 [ ] Other (Specify)	20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place)	20c. LOCATION-City or Town, State
	Nashville Cremation Service	Nashville, Tennessee

21a. SIGNATURE OF FUNERAL DIRECTOR	21b. LICENSE NUMBER OF FUNERAL DIRECTOR	21c. SIGNATURE OF EMBALMER	21d. LICENSE NUMBER OF EMBALMER
Tara M. Jones	5007	N/A	N/A

22a. NAME AND ADDRESS OF FUNERAL HOME	22b. LICENSE NUMBER OF FUNERAL HOME
Brentwood-Roesch-Patton Funeral Home 9010 Church Street East Brentwood, Tennessee 37027	911

REGISTRAR

23. REGISTRAR'S SIGNATURE	24. DATE FILED (Month, Day, Year)
[signature]	January 4, 2006

CERTIFIER

25a. PHYSICIAN - To the best of my knowledge, death occurred at the date and place, and due to the cause(s) and manner as stated.
1 [X] SIGNATURE AND TITLE OF PHYSICIAN: Wee N M

25b. LICENSE NUMBER	25c. DATE SIGNED (Month, Day, Year)
TN35465	1/4/2006

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.
2 [ ] 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 48 HOURS.

27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print)
Dr. William Boger 393 Wallace Rd. Bldg. A Ste. 400 Nashville, TN 37211

CAUSE OF DEATH

26. PART I. Enter the 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.

		Approximate Interval Between Onset and Death
IMMEDIATE CAUSE (Final disease or condition resulting in death) → a.	Respiratory Failure DUE TO (OR AS A CONSEQUENCE OF):	
Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST. b.	Aspiration DUE TO (OR AS A CONSEQUENCE OF):	
c.	Anoxic Brain Injury DUE TO (OR AS A CONSEQUENCE OF):	
d.		

SEE INSTRUCTIONS ON OTHER SIDE

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

29a. WAS AN AUTOPSY PERFORMED? 1 [ ] Yes 2 [X] No	29b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? 1 [ ] Yes 2 [X] No

30. MANNER OF DEATH 1 [X] Natural 2 [ ] Accident 3 [ ] Suicide 4 [ ] Homicide 5 [ ] Pending Investigation 6 [ ] Could not be Determined	31a. DATE OF INJURY (Month, Day, Year)	31b. TIME OF INJURY	31c. INJURY AT WORK? 1 [ ] Yes 2 [ ] No	31d. DESCRIBE HOW INJURY OCCURRED

31e. PLACE OF INJURY-At home, farm, street, factory, office building, etc. (Specify)	31f. LOCATION (Street and Number or Rural Route Number, City or Town, State)

RACHEL A. USELTON
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY, TN
MY COMMISSION EXPIRES
November 14, 2009

RH-1659 (REV. 6/90) BIRTH NO _____ RDA 1399

x Rachel A. Useltan

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 Metropolitan Government of Nashville and Davidson County. Alteration or erasure voids this certification.

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

Tonya Y Ruttlen
Tonya Y. Ruttlen
Local Registrar

JAN 04 2006
Date Issued

CERTIFICATION OF VITAL RECORD