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20090417-0034961

STATE OF TN

COUNTY Davidson

(39)

AFFIDAVIT OF SURVIVING SPOUSE OR JOINT SURVIVOR

Terry S. Ward, being first duly sworn, deposes and says as follows:

1) That Terry S. Ward and Louise A. Ward are joint owners of property under a duly recorded survivorship or tenancy by entireties deed.

2) That the property is known as 3309 Hickory Run, Nashville, (Street and City) Davidson County, State of TN and also known as Permanent Parcel Number 180 04 0B 020.00 on the records of the County Auditor. The original Survivorship Deed is recorded in the records of the _____ County Recorder in Volume _____, Page _____.

I have included the descriptive information requested below and have attached a full legal description as an attachment hereto.

"SEE EXHIBIT "A" ATTACHED"

3) That Louise Ann Ward died on or about 12/4/06, 2006, at _____.

4) That by virtue of the death of the party listed in Item #3 above, Terry S. Ward is the fee simple owner of the above described property and requests that this fact be reflected on the land and tax records of the county.

_____ Witness

Terry S. Ward Affiant Terry S. Ward

_____ Witness

_____ Affiant

STATE OF Tennessee

COUNTY OF Davidson

Sworn to before me and subscribed in my presence this 13th day of February, 2009.

JENNETTE J. CLEMONS STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON COUNTY, TENN.

My Commission Expires MAR. 21, 2009

Jennette J. Clemons
Notary Public
My Commission Expires: 3-21-2009

Prepared by: Donna Narkiewicz, PHH Mortgage Corporation
1 Mortgage Way
Mt. Laurel, NJ. 08054.

STATE OF TENNESSEE
Office of Vital Records

0606856

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER: 2006 051854

TYPE/PRINT IN PERMANENT BLACK INK FOR CERTIFICATE. SEE INSTRUCTIONS HANDBOOK

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last): Louise Ann Ward
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): December 4, 2006
4. SOCIAL SECURITY NUMBER (of Deceased): 220-66-4121
5a. AGE LAST BIRTHDAY (Years): 49
5b. UNDER 1 YEAR — Months
5c. UNDER 1 DAY — Hours / Minutes
6. DATE OF BIRTH (Month, Day, Year): Jan 29, 1957
7. BIRTHPLACE (City and State or Foreign Country): Carlisle, Pennsylvania
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 Yes 2 [X] No
8a. PLACE OF DEATH (Check only one): HOSPITAL 1 [X] Inpatient 2 ER/Outpatient 3 DOA; OTHER 4 Nursing Home 5 Residence 6 Other (Specify)
9b. FACILITY NAME (If not institution, give street and number): Vanderbilt Medical Center 081
9c. CITY, TOWN OR LOCATION OF DEATH: Nashville
9d. COUNTY OF DEATH: Davidson
10. MARITAL STATUS: Married / Never Married / Widowed / Divorced (Specify): Married
11. SURVIVING SPOUSE (If wife, give maiden name): Terry S Ward
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired): Teacher
12b. KIND OF BUSINESS/INDUSTRY: Education
13a. RESIDENCE STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 3309 Hickory Run
CENSUS TRACT: 3
13e. INSIDE CITY LIMITS? [X] Yes [ ] No
13f. ZIP CODE: 37211
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No. If yes, specify Cuban, Mexican, Puerto Rican, etc.) [ ] Yes [X] No
15. RACE: American Indian, Black, White, etc. (Specify): White
16. DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (0-12): 12; College (1-4 or 5+): 4

PARENTS

17. FATHER'S NAME (First, Middle, Last): J Robert Sheppard
18. MOTHER'S NAME (First, Middle, Maiden Surname): Eleanor Grace Shepherd

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Terry S Ward
19b. RELATIONSHIP TO DECEASED: Husband
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 3309 Hickory Run Nashville Tennessee 37211

DISPOSITION

20a. METHOD OF DISPOSITION: 1 [X] Burial 2 Cremation 3 Removal from State 4 [ ] Donation 5 Other (Specify)
20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): Wesley Cemetery
20c. LOCATION (City or Town, State): Hickman County, Kentucky
21a. SIGNATURE OF FUNERAL DIRECTOR: Kristopher L Brock
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 5821
21c. SIGNATURE OF EMBALMER: Brandy Collie
21d. LICENSE NUMBER OF EMBALMER: 5828
22a. NAME AND ADDRESS OF FUNERAL HOME: Brentwood-Roesch-Patton Funeral Home 9010 Church St East Brentwood, Tennessee 37027
22b. LICENSE NUMBER OF FUNERAL HOME: 911

REGISTRAR

23. REGISTRAR'S SIGNATURE: [signature]
24. DATE FILED (Month, Day, Year): December 6, 2006

CERTIFIER

25a. PHYSICIAN: To the best of my knowledge, death occurred at the time, date and place, and due to the cause(s) and manner(s) stated. 1 [X] SIGNATURE AND TITLE OF PHYSICIAN: [signature] Assistant Professor
25b. LICENSE NUMBER: 36626
25c. DATE SIGNED (Month, Day, Year): 12/6/06
26a. MEDICAL EXAMINER: On the basis of examination and/or investigation, in my opinion, death occurred at the date, place, and due to the cause(s) and manner(s) 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. Marta Crispens VUMC North B1100 Nashville, TN 37232

SEE INSTRUCTIONS ON OTHER SIDE

CAUSE OF DEATH

28. 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
a. IMMEDIATE CAUSE (Final disease or condition resulting in death): Endometrial cancer metastatic to brain & lung — 9 mos
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. DUE TO (OR AS A CONSEQUENCE OF):
c. DUE TO (OR AS A CONSEQUENCE OF):
d.

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 [X] Yes 2 [ ] 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)

PH 1559 (REV. 6/99)
BIRTH NO
RDA 1330

3349220

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: Feb-12-2009

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

DEPARTMENT OF HEALTH AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD

EXHIBIT A

LEGAL DESCRIPTION

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. 20, ON THE PLAN OF BROOKVIEW FOREST, PHASE I, OF RECORD IN INSTRUMENT NO..20030716-0099526, REGISTER'S OFFICE FOR SAID COUNTY, TO WHICH PLAN REFERENCE IS HEREBY MADE FOR A MORE COMPLETE DESCRIPTION.

BEING THE SAME PROPERTY CONVEYED TO ED ESCAMILLA AND WIFE, LESLIE ESCAMILLA AKA EDWARD ROBERT ESCAMILLA AND EDWARD ESCAMILLA BY DEED FROM DREES PREMIER HOMES, INC., AN OHIO CORPORATION, DATED 1-23-04, OF RECORD IN INSTRUMENT NO. 20040128-0010856, REGISTER'S OFFICE FOR DAVIDSON COUNTY, TENNESSEE.

SUBJECT TO RESTRICTIONS, RESERVATIONS, EASEMENTS, COVENANTS, OIL, GAS OR MINERAL RIGHTS OF RECORD, IF ANY.
BEING THE SAME PREMISES CONVEYED TO TERRY S. WARD AND WIFE, LOUISE A. WARD FROM ED ESCAMILLA AND WIFE, LESLIE ESCAMILLA BY WARRANTY DEED DATED 03/07/2006, AND RECORDED ON 03/09/2006, DOCUMENT # 20060309-0027381, IN DAVIDSON COUNTY, TN.

