RECORDING REQUESTED BY
ServiceLink
4000 Industrial Blvd.
Aliquippa, PA 15001

WHEN RECORDED MAIL TO:
WILLIAM CARL WILKERSON, JR
8352 HIGHWAY 100
NASHVILLE, TN 37221-4010
Order No: 2000463

Prepared by:
Kimberly Shields, Metlife
700 Corporate Blvd
Newburgh, NY 12550

BILL GARRETT, Davidson County
Trans: T20090064848 AFFIDAVIT
Recvd: 09/23/09 09:41 3 pgs
Fees: 17.00 Taxes: 0.00
20090923-0088416

Affidavit of Death

State of TN
County of DAVIDSON

William Carl Wilkerson, Jr, of legal age, being first duly sworn, deposes and says: That **Mary Frances Wilkerson** the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as **Mary Frances Wilkerson** named as one of the parties in the certain Deed dated 7/15/74 executed by Robert Hendley & Robert N. Gambill to William Carl Wilkerson, Jr and Mary Frances Wilkerson, husband and wife, as joint tenants, recorded as Book 4838 Page 890, on 7/30/74, records of DAVIDSON, TN, covering the following described real property situated in the City of NASHVILLE, County of DAVIDSON, State of TN.

See Exhibit "A" attached hereto and made a part hereof

Tax ID: 169000079.00

That the value of all real and personal property owned by said decedent at the date of death, including the full value of the property above described, did not exceed the sum of $_____.

Dated 8-6-09

William Carl Wilkerson Jr
William Carl Wilkerson, Jr

SWORN AND SUBSCRIBED TO before me this 6 day of August, 2009.

Notary Public
My Commission expires: 7-5-11

PEGGY L. NIEMANN
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON CO., TN

My Commision Expires JULY 5, 2011

Exhibit "A"
Legal Description

All that certain parcel of land situated in the County of Davidson, State of Tennessee, being known and designated as Lot No. 2 on the Plan of Natches Tract Estates, Section I, as of record in Book 4460 Page 129, Register's Office for Davidson County, Tennessee.

Said Lot No. 2 fronts 155.6 feet on the northerly side of State Route 100 and extends back 560.0 feet on the easterly line of 560.0 feet on the westerly line to a dead line measuring 155.6 feet thereon.

Being the same property as conveyed from Robert Hendley and Robert N. Gambill, partners, dba Hendley and Gambill to William Carl Wilkerson, Jr. and Mary Frances Wilkerson, Husband and Wife, as described in Deed Book 4838 Page 890, Dated 07/15/1974, Recorded 07/30/1974 in Davidson County Records.

Tax/Parcel ID: 169000079.00

STATE OF TENNESSEE
Office of Vital Records

0102600

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): Mary Wilkerson
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): May 7, 2001
4. SOCIAL SECURITY NUMBER (of Decedent): [redacted]-6839
5a. AGE-LAST BIRTHDAY (Years): 74
5b. UNDER 1 YEAR (Months / Days)
5c. UNDER 1 DAY (Hours / Min.)
6. DATE OF BIRTH (Month, Day, Year): May 8, 1926
7. BIRTHPLACE (City and State or Foreign Country): Kansas
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 6 [ ] Other (Specify)
9b. FACILITY NAME (If not institution, give street and number): 8352 Hwy 100
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): Carl Wilkerson
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired): Homemaker
12b. KIND OF BUSINESS/INDUSTRY: Domestic
13a. RESIDENCE STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 8352 Hwy 100
CENSUS TRACT
13e. INSIDE CITY LIMITS? 1 [X] Yes 2 [ ] No
13f. ZIP CODE: 37221
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No - if yes, specify Cuban, Mexican, Puerto Rican, etc.) 1 [ ] Yes 2 [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+):

NAME OF DECEDENT (To be completed by Physician or Medical Examiner)

PARENTS

17. FATHER'S NAME (First, Middle, Last): Oscar Brooks
18. MOTHER'S NAME (First, Middle, Maiden Surname): Bernice

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Carl Wilkerson
19b. RELATIONSHIP TO DECEASED: Husband
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 8352 Hwy 100 Nashville, TN 37221

DISPOSITION

20a. METHOD OF DISPOSITION: 1 [ ] Burial 2 [ ] Cremation 3 [ ] Removal from State 4 [ ] Donation 5 [X] Other (Specify): Entombment
20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): Harpeth Hills Memory Gardens
20c. LOCATION - City or Town, State: Nashville, TN
21a. SIGNATURE OF FUNERAL DIRECTOR: ▶ Jeffery L. Murphy
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 3862
21c. SIGNATURE OF EMBALMER: ▶ Stephen R. Murphy
21d. LICENSE NUMBER OF EMBALMER: 4169

REGISTRAR

22a. NAME AND ADDRESS OF FUNERAL HOME: Pettus-Owen and Wood, 4506 Charlotte Avenue Nashville, TN 37209
22b. LICENSE NUMBER OF FUNERAL HOME: 905
23. REGISTRAR'S SIGNATURE: ▶ Robert W. Rhodes Jr.
24. DATE FILED (Month, Day, Year): May 16, 2001

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 [ ] SIGNATURE AND TITLE OF PHYSICIAN: ▶ Allen Cohen
25b. LICENSE NUMBER: 45601
25c. DATE SIGNED (Month, Day, Year): 5/16/2001
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): ACAN COHEN MD 7251 HARDING RD NASHVILLE TN 37205

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)
IMMEDIATE CAUSE (Final disease or condition resulting in death): a. multiple myeloma
DUE TO (OR AS A CONSEQUENCE OF): b.
Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST: 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 [ ] Yes 2 [ ] No
29b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? 1 [ ] Yes 2 [ ] 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-1639 (REV. 6/99)
BIRTH NO.
RDA 1299

3334718

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

Tonya Y. Foreman
Tonya Y. Foreman, Local Registrar
Davidson County, Tennessee

8/5/2009
Date Issued

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

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD