BILL GARRETT, Davidson County
Trans:T20090073217 AFFIDAVIT
Recvd: 10/28/09 10:46 4 pgs
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20091028-0099445

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CHT-2009091138

AFFIDAVIT OF FACTS

STATE OF Tennessee §
§
COUNTY OF Davidson §

BEFORE ME, the undersigned authority, on this day personally appeared the undersigned affiant, who swore on oath that the following facts are true:

"1. My name is Marva W Bryant, I am of sound mind, capable of making this affidavit, and fully competent to testify to the matters stated herein, and I have personal knowledge of each of the matters stated herein.

"2. That my spouse, Earnest E Bryant now deceased, and I were the record title holders of the following described property, as evidenced by that Deed recorded in Deed Book 4634, Page 595, among the land Records of Davidson, Tennessee, to wit: 1974 MWB

"3. That my spouse and I were married prior to 6/13, 20__, the date of our acquisition of title to the property described hereinabove, and we remained continuously married, without interruption by divorce from that date up to the date of my spouse's death, 11/21/2009 20 MWB

"4. That the value of my spouse's estate was insufficient to necessitate the filing of an estate tax return and that there are no state or federal estate or inheritance tax due as a result of his or her death.

"5. That Affiant gives this Affidavit for the purpose of inducing Fidelity National Title Insurance Company to issue its policy or policies insuring the title to said property without exceptions(s) to encumbrance(s) or vesting issues which could have possibly arisen in the event of divorce of the Affiant and Affiant's spouse; and said Affiant does hereby agree to indemnify and hold Fidelity National Title Insurance Company harmless of and from any and all loss, cost, damage and expense of every kind, including Attorneys' fees, which it may suffer or incur or become liable for under its said policy or policies arising directly or indirectly out of or on account of such an intervening divorce, or in connection with its enforcement of its rights under this agreement."

FURTHER THE AFFIANTS SAYETH NAUGHT.

Marva W. Bryant (SEAL)

_____(SEAL)

Executed, subscribed and sworn to before me the 14-14-09 day and year above written.

_____
Notary Public

My Commission expires: 20th March 2010



STATE OF TENNESSEE
Office of Vital Records

0900435

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): Farris E. Bryant, Jr.
2. SEX: Male
3. DATE OF DEATH (Month, Day, Year): January 13, 2009
4. SOCIAL SECURITY NUMBER (of Deceased): 415-62-1397
5a. AGE-LAST BIRTHDAY (Years): 69
5b. UNDER 1 YEAR: MONTHS / DAYS
5c. UNDER 1 DAY: HOURS / MIN.
6. DATE OF BIRTH (Month, Day, Year): Jan 14,1939
7. BIRTHPLACE (City and State or Foreign Country): Nashville, TN
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 [X] ER/Outpatient 3 [ ] DOA; OTHER 4 [ ] Nursing Home 5 [ ] Residence 6 [ ] Other (Specify)
9b. FACILITY NAME (If not institution, give street and number): Skyline Medical Center
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): Marva Williams
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.): Director
12b. KIND OF BUSINESS/INDUSTRY: Metro Gov't
13a. RESIDENCE-STATE: TN
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 3128 Ewingwood Drive
CENSUS TRACT
13e. INSIDE CITY LIMITS? 1 [X] Yes 2 [ ] No
13f. ZIP CODE: 37207
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): Black
16. DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (0-12): 4; College (1-4 or 5+):
NAME OF DECEDENT (If other than person of institution)

PARENTS

17. FATHER'S NAME (First, Middle, Last): Farris E. Bryant, Sr.
18. MOTHER'S NAME (First, Middle, Maiden Surname): Gertrude Bigsby

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Marva Bryant
19b. RELATIONSHIP TO DECEASED: Wife
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 3128 Ewingwood Drive Nashville, TN 37207

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): Greenwood Cemetery
20c. LOCATION-City or Town, State: Nashville, TN
21a. SIGNATURE OF FUNERAL DIRECTOR: ▶ Edward C. Hatch
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 4300
21c. SIGNATURE OF EMBALMER: ▶ Reid Y. VanNess
21d. LICENSE NUMBER OF EMBALMER: 4275
22a. NAME AND ADDRESS OF FUNERAL HOME: Henry Louis Smith Funeral Directors & Cremation Svcs 1503 Buchanan St., Nashville, TN 37208
22b. LICENSE NUMBER OF FUNERAL HOME: 1206

REGISTRAR

23. REGISTRAR'S SIGNATURE: ▶ [signature] DR
24. DATE FILED (Month, Day, Year): January 28, 2009

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: ▶ [signature] MD
25b. LICENSE NUMBER: 30653
25c. DATE SIGNED (Month, Day, Year): 01/27/2009
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): VENKAT REDDY, MD 1804 STATE ST. NASHVILLE, TN 37203

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. CORONARY ATHEROSCLERDSIS
DUE TO (OR AS A CONSEQUENCE OF):
b. CONGESTIVE HEART FAILURE, AF
DUE TO (OR AS A CONSEQUENCE OF):
c. DIABETES MELLITUS
DUE TO (OR AS A CONSEQUENCE OF):
d. HYPERLIPEDEMIA

Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST

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 [ ] 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: M
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):

BATH NO:

PH 1659 (REV 6/99) RDA 1399

3327584

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.

JAN 28 2009

Sharon M. Leinbach
STATE REGISTRAR

Tonya Y. Foreman, Local Registrar
Davidson County, Tennessee

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

Exhibit A

LAND IN DAVIDSON COUNTY, TENNESSEE, BEING LOT NO. 56 ON THE PLAN OF GOLDEN VALLEY ESTATES, SECTION 1, AS OF RECORD IN PLAT BOOK 4175, PAGE 142, SAID REGISTER'S OFFICE.

SAID LOT NO. 56 FRONTS 53.6 FEET ON THE NORTHERLY SIDE OF EWINGWOOD DRIVE, AND RUNS BACK 132.3 FEET ON THE WEST SIDE LINE AND 134.7 FEET ON THE EAST SIDE LINE TO A DEAD LINE ON THE REAR WHICH MEASURES 64.36 FEET.

Commonly known as 3128 Ewingwood Drive Nashville, TN 37207
However, by showing this address no additional coverage is provided.



·U00964336·

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