AFFIDAVIT OF DEATH
AND HEIRSHIP
Of

OLLIE D. SWINT
(print name of deceased person)

BILL GARRETT, Davidson County
Trans:T20100076756 AFFIDAVIT
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For Recording Purposes Only

I, RICHARD D. SWINT,
(print name of person completing form)
being first duly sworn upon oath depose and state:

That I was personally acquainted with
OLLIE D. SWINT
(print name of deceased person)
hereinafter referred to as "the Deceased"
for 53 years, and held the following relationship to the Deceased: CHILD
(i.e. parent, brother, sister, spouse, friend, etc.);

That the Deceased departed this life in the City of NASHVILLE, the County of DAVIDSON, and the State of TENNESSEE, on or about the 10 day of NOVEMBER, in the year 2010. The Deceased was 84 years old at the date of death;

That I am well acquainted with the family of the Deceased and with those who would be the heirs of the Deceased.

That the following statements or answers are based upon my personal knowledge and are true and correct:

PART I - GENERAL INFORMATION

1. Did the Deceased leave a Will? *IF YES, A COMPLETE COPY OF THE WILL IS ATTACHED.* Yes ☑ No ☐

2. Has there been a court proceeding concerning the estate of the Deceased? Yes ☐ No ☑
(i.e. to administer the estate, prove the validity of a will, to sell or distribute the property of the Deceased)

Complete the following only if there has been a court proceeding:

☐ The Estate is open and a copy of the Court issued document naming the executor or administrator is attached. The executor's or administrator's address is as follows:

_____.

☐ The Estate is no longer open and the date it closed is as follows: _____.

3. The Deceased was married 1 times. The names and addresses of ALL PERSONS to whom the Deceased was married together with other information is as follows: ***(attach a separate sheet if necessary)***

	Name of Spouse	Date of Marriage	If not Living, Date of Death	If Divorced from the Deceased, Date and Place	Complete Address, if Living
a)	HELEN E. SWINT	UK	11-05-1983		DECEASED
b)					

TAI

4. Did the Deceased leave any unpaid debts: Yes ☐ No ☑

If Yes, give as nearly as possible the amount of such debts and state whether they have been paid: $ _____ Paid ☐ Unpaid ☐

PART II - CHILDREN OF THE DECEASED:

A separate sheet may be attached if necessary for questions #5 and #6 below.

5. The names of **ALL** children born to or legally adopted by the Deceased (including children from **all** marriages and illegitimate children) together with other information is as follows:

Name of Child	Date of Birth	If not living, Date of Death	Name of Spouse and if not living, Date of Death	Complete Address, if Living
a) RICHARD D. SWINT	2-28-57			740 FALCON DR MADISON TN 37115
b) JUDY L. SWINT	7-29-52			1231 DAVIDSON RD NASHVILLE, TN 37205
c)				
d)				
e)				

6. Of the children named in #5 above who are not living, the names of **ALL** his/her children, together with other information is as follows:

Name of Child	Date of Birth	If not living, Date of Death	Name of Father & Mother	Complete Address, if Living
a)				
b)				
c)				
d)				

If the deceased left no spouse* OR *no children or grandchildren, continue to page 3. Otherwise, complete this Affidavit by signing here and having your signature notarized.

Richard D. Swint

Affiant *(person completing Affidavit)*

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Subscribed and sworn to before me this 6 day of December, 2016

Notary Public

My Commission Expires 9/8/2019

MICHELLE C. HUNT
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY

PREPARED BY:
RICHARD D. SWINT
740 FALCON DR
MADISON, TN 37115