THIS AFFIDAVIT OF HEIRSHIP PREPARED BY:

JEFFREY MOBLEY
Howard Mobley Hayes & Gontarek, PLLC
2319 Crestmoor Road
Nashville, Tennessee 37215
(615) 627-4444

BILL GARRETT, Davidson County
Trans:T20120092456 AFFIDAVIT
Recvd: 12/04/12 11:01 8 pgs
Fees:42.00 Taxes:0.00
20121204-0111387

AFFIDAVIT OF HEIRSHIP

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Comes the affiant, James Anthony Russell, being first duly sworn according to law, being of lawful age and a resident of Nashville, Davidson County, State of Tennessee, since birth, and pursuant to Section 30-2-712 of the Tennessee Code Annotated, hereby swears to the following of his own free will and based upon his personal knowledge and familiarity:

1. Eunice Juanita Huckaby Russell, also known as Juanita Russell, (the "decedent") died on October 7, 2012.

2. The decedent died without a surviving spouse. The decedent was unmarried at her death and died a widow. The decedent's husband, James Alvin Russell, predeceased her on May 15, 2009.

3. The decedent died with two (2) surviving issue—her children James Anthony Russell and Randall Ray Russell. The decedent never had any other children, born or adopted.

4. No will of the decedent has been submitted to probate and the decedent's real and personal estate passes by intestate succession to her heirs-at-law.

5. Accordingly, the heirs-at-law of the decedent are James Anthony Russell and Randall Ray Russell, both of whom are adults.

6. At the time of her death, the decedent owned a parcel of real estate in Davidson County, Tennessee. The decedent's source of title was a deed of record in Deed Book 3310, Page

602-604, Register's Office for Davidson County, Tennessee, a copy of which is attached hereto.

This property is more particularly described as follows:

Parcel Identification Number 073 12 0 070.00

Land in Davidson County, Tennessee, being Lot No. 157 on the Revised Plan of Section One, Sunset View, of record in Book 2663, pages 27 and 28, Register's Office for said county, described as follows:

Beginning at a point in the westerly margin of McGavock Pike at the corner of Lots No. 156 and 157; thence with the line between said lots, southwesterly 195 feet to a corner of Lot No. 158; thence with the line between Lots No. 157 and 158, northwesterly 175 feet to a southerly margin of Dundee Lane; thence with the margin of the same, northeasterly 138 feet to the beginning of a curve; thence around said curve, easterly 31.42 feet to the margin of McGavock Pike; thence with the margin of the same southeasterly 135 feet to the point of the beginning.

This conveyance is subject to restrictive covenants filed for record February 15, 1956, in Book 2492, page 307, refer to Lot Nos. according to plan in Book 2331, pages 100 and 101. The land hereinbefore described is according got the revision of Section I of record in Book 2663, pages 27 and 28. The lot hereinbefore described is the same on both plans.

The recorded plan shows an Owner's Certificate, a 40 foot set-back line from McGavock and from Dundee Lane, a 10 foot easement for public utilities along the southerly side line and an anchor easement 2.5 x 20 feet on Dundee Lane at the west front corner lot.

Being the same property conveyed to James A. Russell and wife, Juanita H. Russell, by Installment Deed from Roy Brown and wife, Betty Lou Brown, of record in Book 3310, Page 602-604. Eunice Juanita Huckaby Russell and Juanita H. Russell are one and the same person.

Juanita Russell acquired all lands owned by her and her husband, James A. Russell, as tenants by the entirety, by right of survivorship when James A. Russell predeceased her on May

15, 2009. Copies of the death certificates of James A. Russell and Juanita Russell are attached hereto.

7. This affidavit will confirm the vesting of title to the real property described above, after the death of Juanita Russell, as equal tenants in common in James Anthony Russell and Randall Ray Russell.

Further, affiant saith not.

Dated this 3rd day of December, 2012.

James Anthony Russell, Affiant

Subscribed and sworn to before me on this the 3rd day of December, 2012.

Notary Public

My Commission expires: July 6, 2015

MICHAEL B. COLYER
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY
My Commission Expires July 6, 2015

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Personally appeared before me, the undersigned, James Anthony Russell, to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed, on this the 3rd day of December, 2012.

Notary Public

My Commission expires: July 6, 2015

Send Tax Bills to **James Anthony Russell & Randall Ray Russell**
c/o James Anthony Russell
2173 June Drive
Nashville, TN 37214

K 3310

68880

INSTALLMENT DEED

FROM

ROY BROWN, KY UX

TO

JAMES A. RUSSELL, KY UX

REGISTER'S OFFICE
STATE OF TENNESSEE
DAVIDSON COUNTY
Received for record 20 day
of May A.D. 1961 at 9:22 o'clock A.M.
Recorded in Book 2664 Page 343
Recording Fee $1.25
JAMES E. WILSON, Register
By [illegible] D.C.

ALL FORMS OF INSURANCE
HARVEY FREEMAN & SONS
DONELSON TENN.

DEWEY W. Pod. 90

FOR AND IN CONSIDERATION of the sum of SEVENTEEN THOUSAND, THREE HUNDRED AND 00/100 ($17,300.00)----------Dollars, of which FOUR THOUSAND, THREE HUNDRED AND 00/100 ($4,300.00)----------Dollars, has been paid to cash, the receipt of which is hereby acknowledged, and for the remainder THIRTEEN THOUSAND AND 00/100 ($13,000.00)----------Dollars, James A. Russell and wife, Juanita H. Russell, to us executed and delivered to us, Roy Brown and wife, Betty Lou Brown, their joint promissory note, of even date herewith, in the principal sum of Thirteen Thousand ($13,000.00) Dollars, payable, with interest from date at 5-3/4% per annum, to the order of said Roy Brown and wife, Betty Lou Brown, in three hundred (300) monthly installments of Eighty-one and 79/100 ($81.79) Dollars each--the first one of said installments to become due on December 3, 1961, and one of the others on or before the 3rd day of each of the succeeding 299 months. Payments as made to be applied first to interest to date of payment and balance to principal, and providing for payment of attorney's fees, and to secure the payment of said indebtedness, principal, interest, and attorney fees, a lien is expressly retained on the land herein conveyed, Roy Brown and wife, Betty Lou Brown, have this day bargained and sold, and do hereby transfer and convey unto the said James A. Russell and wife, Juanita H. Russell, their (survivors), heirs and assigns, certain real estate in Davidson County, Tennessee, as follows:

Land in Davidson County, Tennessee, being Lot No. 157 on the Revised Plan of Section One, Sunset View, of record in Book 2663, pages 27 and 28, Register's Office for said County, described as follows:
BEGINNING at a point in the westerly margin of McGavock Pike at the corner of Lots No. 156 and 157; thence with the line between said lots, southwesterly 195 feet to a corner of Lot No. 158; thence with the line between Lots No. 157 and 158, northwesterly 175 feet to the southerly margin of Dundee Lane; thence with the margin of the same, northeasterly 138 feet to the beginning of a curve; thence around said curve, easterly 31.42 feet to the margin of McGavock Pike; thence with the margin of the same, southeasterly 135 feet to the point of beginning.
Being the same property conveyed to Roy Brown and wife, Betty Lou Brown, by deed from John H. Aschenbrener and wife, of record in Book 2864, page 77, said Register's Office.

This conveyance is subject to restrictive covenants filed for record February 15, 1956, in Book 2492, page 307, refer to Lot Nos. according to plan in Book 2331, pages 100 and 101. The land hereinbefore described is according to the revision of Section I of record in Book 2663, pages 27 and 28. The lot hereinbefore described is the same on both plans.

The recorded plan shows an Owner's Certificate, a 40 foot set-back line from McGavock Pike and from Dundee Lane, a 10 foot easement for public utilities along the southerly side line and an anchor easement 2.5x20 feet on Dundee Lane at the west front corner of the lot.

G 602

K 3310

TO HAVE AND TO HOLD said real estate, with the appurtenances, estate, title and interest thereto belonging, to the said James A. Russell and wife, Juanita H. Russell, their

(successors), heirs and assigns forever. We covenant that We are lawfully seized and possessed of said real estate in fee simple, have a good right to convey it, and that the same is unencumbered.

We further covenant and bind ourselves, our heirs and representatives, to warrant and forever defend the title to said real estate to said James A. Russell and wife, Juanita H. Russell, their

(successors), heirs and assigns, against the lawful claims of all persons.

And now, for the purpose of better and more effectually securing the payment of said lien indebtedness; rendering unnecessary court proceedings for the enforcement of said lien in the event of the non-payment of said indebtedness and installments thereof, as they mature, as hereinafter provided, and for the consideration of one dollar paid in cash, receipt of which is acknowledged, the said James A. Russell and wife, Juanita H. Russell,

hereinafter referred to as trustors, hereby transfer and convey unto William S. Hofstetter Trustee, his successors and assigns, the real estate hereinbefore described, with the appurtenances, estate, title and interest thereto belonging upon the following uses and trusts:

Trustors agree to keep all buildings now or, or to be hereafter erected on said property, insured in some reliable fire insurance company, or companies, for the sum of $ 13,000.00, or at least the maximum insurable value, until the indebtedness herein secured is fully paid, and to have the loss, if any, made payable on the policy, or policies, to said trustee for the benefit of the lawful owner or holder of said indebtedness as his interest may appear.

Trustors further agree to pay all taxes and assessments thereon, general or special, and to pay them when due, and, upon demand of said trustee or the lawful owner and holder of said indebtedness, to pay, discharge, or remove, any and all liens which may be hereafter placed against said property and which shall adversely affect the lien of this instrument or enforcement of the terms and provisions hereof; to keep the improvements on said property in good repair and preservation, and in case the trustee or his successors or the lawful owner and holder of said indebtedness shall hereafter be required to appear in any court or tribunal to enforce, or defend the title to, or possession of, said property, or the lien of this instrument, or appear in any court to prove the above indebtedness, all the costs and expenses of such appearance or proceedings, together with a reasonable attorney's fee, shall be allowed, and be payable by trustors upon demand of the trustee or lawful owner or holder of said indebtedness, and, upon failure to do any of these things, then said trustee, or the lawful owner and holder of said indebtedness may do any or all of these things and the amounts so paid shall bear 6 percent interest from the date of payment and shall be and become a part of the indebtedness secured hereby.

Now, if trustors shall pay the indebtedness aforesaid when due, according to the terms, and pay taxes, keep up repairs, and keep said premises insured, and pay any and all other sums when due, as aforesaid, then this trust conveyance shall be of no further force or effect. But if said indebtedness, or any installment thereof, or interest thereon, is not paid promptly at maturity, or if, failing to pay taxes, keep up repairs or keep said premises insured, or pay said other sums when due, as herein provided, trustors fail to reimburse the trustee, or lawful owner and holder of said indebtedness for all sums, with interest, so expended by said trustee, or lawful owner and holder of said indebtedness, within thirty days from date of such payment, this trust conveyance shall remain in full force and effect, and at the option of the lawful owner and holder of said indebtedness then past due and unpaid, all remaining unpaid indebtedness, and installments thereof, shall become due and payable at once, without notice, and the said trustee, or his successor in trust, is hereby authorized and empowered, upon giving twenty days' notice by three publications in any newspaper, daily or weekly, published in Davidson County, Tennessee, to sell said property at the front door of the Court House in said County to the highest bidder for cash, at public outcry, free from the equity of redemption, homestead, dower and all other exemptions of every kind, which are hereby expressly waived; and the said trustee, or his successor in trust, is authorized and empowered to execute and deliver a deed to the purchaser. The creditor may bid at any sale under this trust conveyance. The trustee may, at any time after default in the payment of any of said indebtedness, enter and take possession of said property, and shall only account for the net rents actually received by him. It is further agreed that, in the event the trustee fails, before selling said property, as herein provided, to enter and take possession thereof, the purchaser shall be entitled to immediate possession thereof upon the delivery to him by the trustee of a deed for said property. In case of sale hereunder, the proceeds will be applied by the trustee as follows:

1st.- To the payment of all costs, charges and expenses of executing this conveyance and enforcing said lien as herein provided; also reasonable attorney's fees for advice in the premises, or for instituting or defending any litigation which may arise on account of the execution of this conveyance, or the enforcement of said lien; also the expenses of any such litigation.

2nd. To the payment of all taxes which may be unpaid on said premises.

3rd. To the payment of all unpaid indebtedness herein secured, and any and all sums expended in the protection of said property, as herein authorized.

4th. The residue, if any, will be paid to trustors, their order, representatives or assigns.

G 603

K 3310

In case of the death, absence, inability, or refusal to act of said trustee at any time when action under the foregoing power and trusts may be required, the lawful owner and holder of said indebtedness, or, if more than one when said indebtedness is represented by notes, then of the first-maturing unpaid note, or upon his refusal or failure so to do, then the holder in order of the next maturing notes, is hereby authorized and empowered to name and appoint a successor to execute this trust by an instrument in writing to be recorded in the Register's Office for Davidson County, Tennessee, and the title herein conveyed to the above named trustee shall be vested in said successor.

The word "Trustors" when used herein shall apply to parties both singular and plural.

IN WITNESS WHEREOF the parties to this instrument have signed their names, and the corporate party has caused its name to be signed hereto by its duly authorized officers, on this the 17th day of November, 1961.



Roy Brown
Betty Lou Brown
James A. Russell
Juanita H. Russell

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Personally appeared before me, Kitty C. Baker, a Notary Public in and for said County and State, Roy Brown and wife, Betty Lou Brown, and James A. Russell and wife, Juanita H. Russell,

the within named bargainor, B. with whom I am personally acquainted, and who acknowledged that they executed the within instrument for the purpose therein contained.

Witness my hand and official seal at Nashville, Tennessee, this 17th day of November, 1961.

Kitty C. Baker
Notary Public

Commission expires 7/29/1964

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Before me, _____, a Notary Public of the State and County aforesaid, personally appeared _____ with whom I am personally acquainted, and who, upon oath, acknowledged _____ self to be _____ of the _____ the within named bargainor, a corporation, and that he as such _____ being authorized so to do, executed the foregoing instrument for the purpose therein contained, by signing the name of the corporation by _____ self as _____

Witness my hand and seal, at office in _____ this _____ day of _____, 19__

_____ Notary Public

Commission expires _____

R. E. WORRALL
COUNTY COURT CLERK
DAVIDSON COUNTY, TENN.

NOV 20 1961

STATE TAX $ 25.95
PRIVATE .50
TOTAL $ 26.45

G 604

STATE OF TENNESSEE
Office of Vital Records

STATE FILE NUMBER 193097

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

DO NOT PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

1. DECEDENT'S NAME (First, Middle, Last): James Alvin Russell	2. SEX: Male	3. DATE OF DEATH (Month, Day, Year): May 15, 2009	
4. SOCIAL SECURITY NUMBER: [redacted]-8687	5a. AGE-LAST BIRTHDAY (Years): 91	5b. UNDER 1 YEAR: MOS. / DAYS	5c. UNDER 1 DAY: HOURS / MIN.
6. DATE OF BIRTH (Month, Day, Year): Apr. 29, 1918	7. BIRTHPLACE (City and State or Foreign Country): Greenville, South Carolina		
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 [X] Yes 2 [ ] No	9a. PLACE OF DEATH (Check only one): HOSPITAL: 1 [ ] Inpatient 2 [ ] ER/Outpatient 3 [ ] DOA; OTHER: 4 [ ] Nursing Home 5 [ ] Residence 6 [X] Other (Specify): Hospice		
9b. FACILITY NAME (If not institution, give street and number): Alive Hospice	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): Juanita Huckaby	12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.): Saleman	12b. KIND OF BUSINESS/INDUSTRY: Nashville Gas Company
13a. RESIDENCE-STATE: Tennessee	13b. COUNTY: Davidson	13c. CITY, TOWN OR LOCATION: Nashville	13d. STREET AND NUMBER OR RURAL LOCATION: 2435 Dundee Lane
CENSUS TRACT	13e. INSIDE CITY LIMITS? 1 [X] Yes 2 [ ] No	13f. ZIP CODE: 37214	14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify No, or Yes, 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): 11	College (1-4 or 5+):
NAME OF DECEDENT: For use by physician or medical examiner only	17. FATHER'S NAME (First, Middle, Last): James Alvin Russell	18. MOTHER'S NAME (First, Middle, Maiden Surname): Mamaie Ammon	
	19a. INFORMANT'S NAME (Type/Print): James A. Russell	19b. RELATIONSHIP TO DECEASED: Son	19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 2173 June Drive Nashville, Tennessee 37214
	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): Woodlawn Cross Mausoleum	20c. LOCATION-City or Town, State: Nashville
	21a. SIGNATURE OF FUNERAL DIRECTOR: J. Mark Todd	21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 3757	21c. SIGNATURE OF EMBALMER: Brandy Allen
	21d. LICENSE NUMBER OF EMBALMER: 5828		
	22a. NAME AND ADDRESS OF FUNERAL HOME: Woodlawn Roesch-Patton Funeral Home 660 Thompson Lane, Nashville, Tennessee 37204	22b. LICENSE NUMBER OF FUNERAL HOME: 933	
	23. REGISTRAR'S SIGNATURE: Linda K. Bowers, DR	24. DATE FILED (Month, Day, Year): June 3, 2009	
	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]	25b. LICENSE NUMBER: 44186	25c. DATE SIGNED (Month, Day, Year): 6-02-2009
	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): David B. Tribble, MD 1710 Patterson Street, Nashville, Tennessee 37203		

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. Transitional Cell Cancer of the Bladder
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.

SEE INSTRUCTIONS ON OTHER SIDE

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I: Coronary Artery Disease, Overactive Cerebellum

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: 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)	

FH-1650 (REV. 8/99)

BIRTH NO. _____

RDA 1389

3335574

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

JUN 03 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

STATE OF TENNESSEE
Office of Vital Records

1206123

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER

DECEDENT

1. DECEDENT'S LEGAL NAME (First, Middle, Last, Suffix): Juanita Russell
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): October 7, 2012
4. TIME OF DEATH (Approx.): 5
5a. AGE-Last Birthday (Years): 90
5b. UNDER 1 YEAR: Months / Days
5c. UNDER 1 DAY: Hours / Minutes
6. DATE OF BIRTH (Month, Day, Year): November 4, 1921
7. BIRTHPLACE (City and State or Foreign Country): Union Grove, Alabama

TYPE/PRINT IN PERMANENT BLACK INK

8a. PLACE OF DEATH (Check only one)
IF DEATH OCCURRED IN A HOSPITAL: [X] Inpatient [ ] ER/Outpatient [ ] DOA
IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL: [ ] Hospice facility [ ] Nursing home/Long term care facility [ ] Decedent's home [ ] Other residence [ ] Other (Specify) _____

8b. FACILITY NAME (If not institution, give street and number): Centennial Medical Center
8c. CITY OR TOWN: Nashville
8d. COUNTY OF DEATH: Davidson

NAME OF DECEDENT (For use by Physician or Institution)

9. MARITAL STATUS: [ ] Married [ ] Married, but separated [X] Widowed [ ] Divorced [ ] Never married [ ] Unknown
10. SURVIVING SPOUSE (If wife, give name prior to first marriage)
11a. DECEDENT'S USUAL OCCUPATION: Homemaker
11b. KIND OF BUSINESS/INDUSTRY: Domestic
12. SOCIAL SECURITY NUMBER: [redacted]6433
13a. RESIDENCE-STATE OR FOREIGN COUNTRY: Tennessee
13b. COUNTY: Wilson
13c. CITY OR TOWN: Mt. Juliet
13d. STREET AND NUMBER: 100 Carrick Court
13e. INSIDE CITY LIMITS: [X] Yes [ ] No
13f. ZIP CODE: 37122
14. WAS DECEDENT EVER IN US ARMED FORCES? [ ] Yes [X] No

15. DECEDENT'S EDUCATION (Check the box that best describes the highest degree or level of school completed at the time of death)
[ ] 8th grade or less
[ ] 9th – 12th grade, no diploma
[X] High school graduate or GED completed
[ ] Some college credit, but no degree
[ ] Associate degree (e.g., AA, AS)
[ ] Bachelor's degree (e.g., BA, AB, BS)
[ ] Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA)
[ ] Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LLB, JD)
[ ] Unknown

16. DECEDENT OF HISPANIC ORIGIN? (Check the box that best describes whether the decedent is Spanish/Hispanic/Latino. Check the "No" box if decedent is not Spanish/Hispanic/Latino)
[X] No, not Spanish/Hispanic/Latino
[ ] Yes, Mexican, Mexican American, Chicano
[ ] Yes, Puerto Rican
[ ] Yes, Cuban
[ ] Yes, other Spanish/Hispanic/Latino (Specify) _____
[ ] Unknown

17. DECEDENT'S RACE (Check one or more races to indicate what the decedent considered himself or herself to be)
[X] White
[ ] Black or African American
[ ] American Indian or Alaska Native (Name of the enrolled or principal tribe) _____
[ ] Asian Indian
[ ] Chinese
[ ] Filipino
[ ] Japanese
[ ] Korean
[ ] Vietnamese
[ ] Other Asian (Specify) _____
[ ] Native Hawaiian
[ ] Guamanian or Chamorro
[ ] Samoan
[ ] Other Pacific Islander (Specify) _____
[ ] Other (Specify) _____
[ ] Unknown

PARENTS

18. FATHER'S NAME (First, Middle, Last): Clarence Huckaby
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last): Eunice Williams

DISPOSITION

20a. INFORMANT'S NAME: James A. Russell
20b. RELATIONSHIP TO DECEDENT: Son
20c. MAILING ADDRESS (Street and Number, City, State, Zip Code): 2173 June Drive, Nashville, TN 37214

21a. METHOD OF DISPOSITION: [ ] Burial [ ] Cremation [ ] Donation [X] Entombment [ ] Removal from State [ ] Other (Specify) _____
21b. PLACE OF DISPOSITION (Name of cemetery, crematory, other place): Woodlawn Memorial Park
21c. LOCATION - City or Town and State: Nashville, Tennessee

22a. SIGNATURE OF FUNERAL DIRECTOR: ▶ Amanda J. Williams
22b. LICENSE NUMBER: 6184
22c. SIGNATURE OF EMBALMER: ▶ Jeff Plunk
22d. LICENSE NUMBER: 4353

23a. NAME AND ADDRESS OF FUNERAL HOME: Woodlawn-Roesch-Patton Funeral Home, 660 Thompson Lane, Nashville, TN 37204
23b. LICENSE NUMBER OF FUNERAL HOME: 933

REGISTRAR

24. REGISTRAR'S SIGNATURE: ▶ Tonya Y. Starkey
25. DATE FILED (Month, Day, Year): October 17, 2012

CERTIFIER

26. CERTIFIER (Check only one)
26a. [X] PHYSICIAN - To the best of my knowledge, death occurred at the date and place, and due to the cause(s) and manner stated.
26b. [ ] 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 stated.

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CAUSE OF DEATH MUST COMPLETE AND SIGN WITHIN 48 HOURS.

27a. SIGNATURE OF CERTIFIER: ▶ [signature]
27b. LICENSE NUMBER: MD 105 C
27c. DATE SIGNED (Month, Day, Year): 10-16-12
27d. NAME AND ADDRESS: STMC Nashville

MEDICAL CERTIFICATION

29. PART I - Enter the chain of events (diseases, injuries, or complications) that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. Enter only one cause on a line.

		Approximate interval: Onset to death
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a. CARDIO RESP ARREST	MINS
Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST	Due to (or as a consequence of): b. CONGEST ANCHRSM	YRS
	Due to (or as a consequence of): c. ACUTE ANEMIA	YRS
	Due to (or as a consequence of): d. ATRIAL FIBRILLA	YRS

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

29a. WAS AN AUTOPSY PERFORMED? [ ] Yes [X] No
29b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? [ ] Yes [X] No

30. MANNER OF DEATH: [X] Natural [ ] Homicide [ ] Accident [ ] Pending Investigation [ ] Suicide [ ] Could not be determined
31. DID TOBACCO USE CONTRIBUTE TO DEATH? [ ] Yes [ ] Probably [ ] No [ ] Unknown
32. IF FEMALE: [ ] Not pregnant within past year [ ] Pregnant at time of death [ ] Not pregnant, but pregnant within 42 days of death [ ] Not pregnant, but pregnant 43 days to 1 year before death [ ] Unknown if pregnant within the past year
33. IF TRANSPORTATION INJURY, SPECIFY: [ ] Driver/Operator [ ] Passenger [ ] Pedestrian [ ] Other (Specify) _____
34a. DATE OF INJURY (Month, Day, Year)
34b. TIME OF INJURY
34c. INJURY AT WORK? [ ] Yes [ ] No
34d. PLACE OF INJURY - at home, farm, street, factory, office, building, etc. (Specify)
34e. DESCRIBE HOW INJURY OCCURRED
34f. LOCATION OF INJURY (Street and Number, City or Town, State)

PH-1659 (Rev. 10/2011) RDA 1399

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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.

5530981

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

Teresa S. Hendricks
STATE REGISTRAR

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

OCT 17 2012
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