This instrument was prepared by: Beck & Beck Attorneys, 4205 Gallatin Road, Nashville, Tennessee 37216

ADDRESS OF NEW OWNER AS FOLLOWS:
John M. McNabb
921 Curdwood Blvd.
Nashville, TN 37216

BILL GARRETT, Davidson County
Trans:T20140039684 AFFIDAVITH
Recvd: 06/05/14 12:20 4 pgs
Fees:22.00 Taxes:0.00
20140605-0048994

SEND TAX BILLS TO:
Same as New Owner

MAP and PARCEL: 61-11, 44.00

AFFIDAVIT OF HEIRSHIP AS TO THE HEIRS OF MARILYN MCNABB

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Affiant, **JOHN M. MCNABB,** who resides at 921 Curdwood Blvd., Nashville, TN 37216, after first being duly sworn, states that he is an adult citizen and resident of Nashville, Davidson County, Tennessee, being over 18 years of age. He further states that he was the husband of **MARILYN MCNABB.**

MARILYN MCNABB died on October 16, 2003. **MARILYN MCNABB** was married at the time of her death. The affiant further states that two children were born to himself and **MARILYN MCNABB**, their names being **KAYLA B. MCNABB**, who resides at 921 Curdwood Blvd., Nashville, TN 37216, and **CHRISTOPHER W. MCNABB**, who also resides at 921 Curdwood Blvd., Nashville, TN 37216. Both children are over 18 years of age.

MARILYN MCNABB owned certain real property, known as **912 Virginia Ave., Nashville, TN 37216** in fee simple.

MARILYN MCNABB died intestate. Pursuant to T.C.A. §31-2-104 , the above-

mentioned real property passed by one-third share to her husband and one-third share to each of her two children. She was forty-two years old at the time of her death and therefore was not subject to any recovery by the Bureau of Tenncare.

This Affidavit of Heirship is freely given pursuant to Section 30-2-712, et seq., Tenn. Code Ann., to help establish and reflect the heirship with respect to any real or personal property owned by **MARILYN MCNABB** in Davidson County, Tennessee, or elsewhere and particularly to confirm the vesting of title to certain real property in Davidson County, Tennessee described as follows:

> Land in Davidson County, Tennessee, being Lot(s) 26, as shown on the map entitled Maplewood Manor Subdivision, of record in Book 547, Page 102, Register's Office for Davidson County, Tennessee, to which plan reference is hereby made for a more complete and accurate legal description.
>
> Being the same property conveyed to Wesley L. Smith, Marilyn K. McNabb, and Calvin G. Smith, Jr., as tenants in common without the right of survivorship by deed from Ollie S. Kelly, a single person of record in Book 9424, Page 500, dated July 9, 1994, said Register's Office.
>
> Calvin G. Smith, Jr. died intestate on or about August 26, 2001. His estate, Docket No. 01P1494, in the Seventh Circuit Court for Davidson County, Tennessee, at Nashville, Probate Division was declared insolvent by the Agreed Order, dated October 4, 2002, in the partition suit in Docket NO. 02P796, in the Seventh Circuit Court for Davidson County, Tennessee, at Nashville, Probate Division. Pursuant to said Agreed Order, the property was to be conveyed to Marilyn McNabb by quitclaim from Deborah Chambliss, Administratrix for the Estate of Calvin Gene Smith, Jr., and by Wesley Lowell Smith.
>
> Deborah Chambliss, Administratrix for the Estate of Calvin Gene Smith, Jr, has conveyed the estate's interest in said property to Marilyn McNabb by quitclaim deed of record in Intrument No. 20021122-0145444, dated November 6, 2002, said Register's Office.
>
> Wesley L. Smith has conveyed his interest in said property to Marilyn McNabb by quitclaim deed of record in Instrument No. 20021122-0145445, dated November 12, 2002, said Register's Office.
>
> Marilyn McNabb died intestate on October 16, 2003, thus titling said property by intestacy to her husband John M. McNabb with a one-third interest and their two children, Kayla B. McNabb and Christopher W. McNabb, each with one-third interest.
>
> This property is known as 912 Virginia Ave., Nashville, TN 37216.

Under penalties of perjury the undersigned makes this Affidavit contained in the foregoing statement.

FURTHER AFFIANT SAITH NOT.

John M. McNabb

JOHN M. MCNABB

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Sworn to and subscribed before me this 3 day of June, 2014.

Karen Burnette

NOTARY PUBLIC

My Commission Expires: 12/6/2016

KAREN BURNETTE STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON COUNTY

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Personally appeared before me, Karen Burnette, a Notary Public in and for said County and State, the within named **JOHN M. MCNABB**, affiant with whom I am personally acquainted or proved to me on the basis of satisfactory evidence, and who acknowledged that he executed the within instrument for the purposes therein contained. Witness my hand and official seal at Nashville, Tennessee this 3 day of June, 2014.

Karen Burnette

NOTARY PUBLIC

My Commission Expires: 12/6/2016

KAREN BURNETTE STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON COUNTY

METROPOLITAN GOVERNMENT OF NASHVILLE & DAVIDSON COUNTY
Office of Vital Records

0305925

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): Marilyn Kay McNabb
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): 10/16/2003
4. SOCIAL SECURITY NUMBER: [redacted]-4942
5a. AGE-LAST BIRTHDAY (Years): 42
5b. UNDER 1 YEAR (Months / Days)
5c. UNDER 1 DAY (Hours / Min.)
6. DATE OF BIRTH (Month, Day, Year): May 24, 1961
7. BIRTHPLACE (City and State or Foreign Country): Nashville, TN
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 [ ] Yes 2 [X] No
8a. 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): Michael McNabb
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.): Office Worker
12c. KIND OF BUSINESS/INDUSTRY: Thomas Nelson Publishers
13a. RESIDENCE-STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN, OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 921 Curdwood Blvd.
CENSUS TRACT
13e. INSIDE CITY LIMITS? 1 [X] Yes 2 [ ] No
13f. ZIP CODE: 37216
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+):

PARENTS

17. FATHER'S NAME (First, Middle, Last): Calvin Smith
18. MOTHER'S NAME (First, Middle, Maiden Surname): Emma Christine Green

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Mike McNabb
19b. RELATIONSHIP TO DECEASED: Husband
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 921 Curdwood Blvd. Nashville, TN 37216

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): Harpeth Hills Memory Gardens
20c. LOCATION-City or Town, State: Nashville, TN
21a. SIGNATURE OF FUNERAL DIRECTOR: ▶ Jeff Murphy
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 3862
21c. SIGNATURE OF EMBALMER: ▶ Margo Lamb
21d. LICENSE NUMBER OF EMBALMER: 4603
22a. NAME AND ADDRESS OF FUNERAL HOME: Spring Hill 5110 Gallatin Rd. Nashville, TN 37216
22b. LICENSE NUMBER OF FUNERAL HOME: 1046

REGISTRAR

23. REGISTRAR'S SIGNATURE: ▶ Robert W. Rhoden Jr.
24. DATE FILED (Month, Day, Year): October 22, 2003

CERTIFIER

25. 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 ▶
25b. LICENSE NUMBER:
25c. DATE SIGNED (Month, Day, Year):
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 [X] SIGNATURE AND TITLE OF MEDICAL EXAMINER: ▶ John E. Gerber, MD.
26b. LICENSE NUMBER: 29698
26c. DATE SIGNED (Month, Day, Year): 10/16/2003
PHYSICIAN OR MEDICAL EXAMINER CERTIFYING CERTIFICATE MUST COMPLETE AND SIGN MEDICAL CERTIFICATION WITHIN 48 HOURS.
27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print): John E. Gerber, M.D.; 850 R.S. Gass Blvd., Nashville, TN 37216; MEC03-2969

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. Hypertensive and Atherosclerotic Cardiovascular Disease
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.
29a. WAS AN AUTOPSY PERFORMED? 1 [X] Yes 2 [ ] No
29b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? 1 [X] Yes 2 [ ] No
30. MANNER OF DEATH: 1 [X] Natural 5 [ ] Pending Investigation; 2 [ ] Accident; 3 [ ] Suicide 6 [ ] Could not be Determined; 4 [ ] Homicide
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-1899 (REV. 6/99)
BIRTH NO.:
RDA 139

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 Metropolitan Government of Nashville and Davidson County. Alteration or erasure voids this certification.

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

Tonya Y. Ruttlen
Tonya Y. Ruttlen
Local Registrar

11/3/2003
Date Issued

CERTIFICATION OF VITAL RECORD