THIS DOCUMENT PREPARED BY:

Barbara J. Moss
Elder Law of Nashville PLC
4525 Harding Pike, Suite 200
Nashville, TN 37205

OWNERS: **Edward Masuoka**
15902 Sherwood Ave.
Laurel, MD 20707

Parcel ID: Tax Map
Being part of Lot 32 on the Map of Belair, of Record in Bood 332, Page 6, Register's office for Davidson County, Tennessee

SEND TAX NOTICE TO: **Same**

BILL GARRETT, Davidson County
Trans:T20160045235 AFFIDAVITH
Recvd: 05/27/16 15:43 3 pgs
Fees:17.00 Taxes:0.00
20160527-0053985

AFFIDAVIT OF INHERITANCE

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

The undersigned, Charles Norris, being duly sworn, deposes and says:

Robert Masuoka, a resident of Davidson County, Tennessee, died on November 6th, 2015 (death certificate attached). He was unmarried and had no children. At the time he died, Robert's parents, Jitsuichi Masuoka and Edna Catherine Cooper Masuoka had predeceased him and he had two brothers, Edward Masuoka and Howard Masuoka.

The undersigned knew Robert Masuoka since 1971 and was a friend of his until Mr. Masuoka died. The undersigned met with Robert Masuoka once a week for several years.

Charles Norris
Charles Norris

BEFORE me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared Charles Norris, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person described in the foregoing, who signed the foregoing instrument in my presence, and who, upon oath, acknowledged that he/she executed the foregoing instrument for the purposes therein contained as his/her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand affixed my seal at my office in said County, on this 20 day of May, 2016.

Notary Public

My Commission Expires: 9-10-2018

STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON COUNTY

T.C.A. § 67-4-409(a)(3)(D) exempts this instrument from tax and T.C.A. § 67-4-409(a)(5) further provides the valuation oath is unnecessary, the affidavit being used to evidence transfer of title to the property to beneficiaries.

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER: 517307

DECEDENT

1. DECEDENT'S LEGAL NAME (First, Middle, Last, Suffix): Robert A Masuoka
2. SEX: Male
3. DATE OF DEATH (Month, Day, Year): November 06, 2015
4. TIME OF DEATH (Actual): 6:29 PM
5a. AGE (Last Birthday) (Years): 60
5b. UNDER 1 YEAR: Months / Days
5c. UNDER 1 DAY: Hours / Minutes
6. DATE OF BIRTH (Month, Day, Year): February 15, 1955
7. BIRTHPLACE (City and State or Foreign Country): Nashville, Tennessee

TYPE/PRINT IN PERMANENT BLACK INK

8a. PLACE OF DEATH (Check only one)
8b. 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 [X] Decedent's home [ ] Other residence [ ] Other (Specify)

8b. FACILITY NAME (If not institution, give street and number): 2609 Natchez Trace
8c. CITY OR TOWN: Nashville
8d. COUNTY OF DEATH: Davidson

9. MARITAL STATUS: [ ] Married [ ] Married, but separated [ ] Widowed [ ] Divorced [X] Never married [ ] Unknown
10. SURVIVING SPOUSE (If wife, give name prior to first marriage)
11a. DECEDENT'S USUAL OCCUPATION: Landscaper
11b. KIND OF BUSINESS/INDUSTRY: Landscaping
12. SOCIAL SECURITY NUMBER: [redacted]-8549
13a. RESIDENCE-STATE OR FOREIGN COUNTRY: Tennessee
13b. COUNTY: Davidson
13c. CITY OR TOWN: Nashville
13d. STREET AND NUMBER: 2609 Natchez Trace
13e. INSIDE CITY LIMITS: [X] Yes [ ] No
13f. ZIP CODE: 37212
14. WAS DECEDENT EVER IN US ARMED FORCES?: [ ] Yes [X] No

NAME OF DECEDENT (For use by Physician or Institution)

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
[ ] High school graduate or GED completed
[ ] Some college credit, but no degree
[ ] Associate degree (e.g., AA, AS)
[X] 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

24 hr

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)
[ ] White
[ ] Black or African American
[ ] American Indian or Alaska Native (Name of the enrolled or principal tribe)
[ ] Asian Indian
[ ] Chinese
[ ] Filipino
[X] 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): Jitsuichi Masuoka
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last): Edna Cooper

DISPOSITION

20a. INFORMANT'S NAME: Edward Masuoka
20b. RELATIONSHIP TO DECEDENT: Brother
20c. MAILING ADDRESS (Street and Number, City, State, Zip Code): 15902
21a. METHOD OF DISPOSITION: [ ] Burial [X] Cremation [ ] Donation [ ] Entombment [ ] Removal from State [ ] Other (Specify)
21b. PLACE OF DISPOSITION (Name of cemetery, crematory, other place): Polk Memorial Crematory
21c. LOCATION - City or Town and State: Columbia, TN
22a. SIGNATURE OF FUNERAL DIRECTOR
22b. LICENSE NUMBER: 4691
22c. SIGNATURE OF EMBALMER
22d. LICENSE NUMBER
23a. NAME AND ADDRESS OF FUNERAL HOME: Cremation Society of Tennessee, 2014 Elmer Pogue Dr Ste 102, Columbia Tennessee 38401
23b. LICENSE NUMBER OF FUNERAL HOME: 1230

REGISTRAR

24. REGISTRAR'S SIGNATURE
25. DATE FILED (Month, Day, Year): Nov 6, 2015

CERTIFIER

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

26. CERTIFIER (Check only one):
26a. [ ] PHYSICIAN - To the best of my knowledge, death occurred at the date and place, and due to the cause(s) and manner stated.
26b. [X] 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.
27a. SIGNATURE OF CERTIFIER
27b. LICENSE NUMBER: 34634
27c. DATE SIGNED (Month, Day, Year): November 07, 2015
27d. NAME AND ADDRESS: Adele Lewis, M.D., 850 R.S. Gass Boulevard, Nashville, TN 37216, MEC15-2638

MEDICAL EXAMINER

28. 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. Pending further studies	
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	b. Due to (or as a consequence of)	
	c. Due to (or as a consequence of)	
	d. Due to (or as a consequence of)	

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 [ ] No

30. MANNER OF DEATH: [ ] Natural [ ] Homicide [ ] Accident [X] Pending investigation [ ] Suicide [ ] Could not be determined
31. DID TOBACCO USE CONTRIBUTE TO DEATH? [ ] Yes [ ] Probably [ ] No [X] 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)

TH-1659 (Rev. 9/2014) RDA 1399

I hereby certify the above to be a true and correct representation of the record or document on file in this department. This certified copy is valid only when printed on security paper showing the red embossed seal of the Tennessee Department of Health. Alteration or erasure voids this certification. Reproduction of this document is prohibited.

8240911

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

8240911

R Benton McDonough, JD
STATE REGISTRAR

John J. Dreyzehner, MD, MPH, FACOEM
COMMISSIONER

Date Issued

CERTIFICATION OF VITAL RECORD

K 2245

For and in consideration of the sum of $10.00 and ...

...DOLLARS

and other valuable considerations paid by Jitsuichi Masuoka and wife, Edna Cooper Masuoka, the receipt of all of which is hereby acknowledged,

We, JOHN C. ALLEN and wife, ALICE E. ALLEN,

have bargained and sold, and by these presents do transfer and convey unto the said JITSUICHI MASUOKA and wife, EDNA COOPER MASUOKA, their heirs and assigns, a certain tract or parcel of land in Davidson County, State of Tennessee, described as follows to wit:

Being part of Lot No. 32 on the Map of Belair, of record in Book 332, page 6, Register's Office for said County, and described as follows:

Beginning at a point in the westerly margin of Natchez Trace, formerly 28th Avenue, South, 115 feet north of the north margin of Westwood Avenue; thence westerly parallel to the north margin of Westwood Avenue 150 feet to a point; thence northerly parallel to the west margin of Natchez Trace 50 feet to an iron pin; thence easterly parallel to the north margin of Westwood Avenue, 87 feet to a stake; thence south one foot to a stake; thence easterly 36 feet to a stake; thence northerly one foot to a stake; thence easterly parallel to the north margin of Westwood Avenue, 27 feet to an iron pin in the west margin of Natchez Trace; thence with the margin of the same southerly 50 feet to the beginning.

Being part of the property conveyed to John C. Allen and wife, Alice E. Allen, by deed from Clayton C. Clark and wife, Clara B. Clark, of record in Book 1631, page 134, said Register's Office.

To have and to hold the said tract or parcel of land, with the appurtenances, estate, title and interest thereto belonging to the said JITSUICHI MASUOKA and wife, EDNA COOPER MASUOKA, their heirs and assigns, forever.

And we do covenant with the said JITSUICHI MASUOKA and wife, EDNA COOPER MASUOKA, that we are lawfully seized and possessed of said land in fee simple; have a good right to convey it, and the same is unencumbered.

And we, JOHN C. ALLEN and wife, ALICE E. ALLEN, do further covenant and bind ourselves, our heirs and representatives, to warrant and forever defend the title to the said land to the said JITSUICHI MASUOKA and wife, EDNA COOPER MASUOKA, their heirs and assigns against the lawful claims of all persons, whomsoever.

Witness our hand s this 15th day of JANUARY, 1954.

John C. Allen

Alice E Allen

STATE OF TENNESSEE
Davidson County

Personally appeared before me, G. S. Scoville, a Notary Public in and for said County and State, the within named John C. Allen and wife, Alice E. Allen, the bargainors with whom I am personally acquainted, and who acknowledged that they executed the within instrument for the purposes therein contained. Witness my hand and official seal at Nashville, Tennessee, this 15th day of JANUARY, 1954.

My Commission Expires April 14, 1957

G. S. Scoville
Notary Public

WARRANTY DEED
MCRAE
FROM
JOHN C. ALLEN ET UX.
TO
JITSUICHI MASUOKA ET UX.
8883

STATE OF TENNESSEE
DAVIDSON COUNTY
Received for Record
JAN 18 1954
at 2:04 P.M.
Book 2202
Page 404

G 313