THIS INSTRUMENT WAS PREPARED AT THE REQUEST OF GRANTOR WITHOUT THE BENEFIT OF TITLE SEARCH OR SURVEY BY:

LARRY B. HOOVER
ATTORNEY AT LAW
1222 16th Avenue South, Suite 12
NASHVILLE, TENNESSEE 37212

ADDRESS NEW OWNER:
Judy Dunn
4804 Indian Summer Drive
Nashville, TN 37218

MORTGAGE: None

MAP-PARCEL: 058 16 0 125.00

Property Address:
372 Kingview Drive
Nashville, TN 37218

SENT TAX BILLS:
Same as above

AFFIDAVIT OF HEIRSHIP

On this 23 day of Nov, 2016, before me personally appeared Judy Dunn, hereinafter referred to as Affiant, being duly sworn, makes oath as follows.

1. That Affiant presently resides at the following address: 4804 Indian Summer Drive, Nashville, TN 37207.
2. That Affiant is the only child of, and personally knew James L. Dunn who is now deceased. James L. Dunn was not married at the time of this death on May 17, 2016. Attached to this affidavit is the certificate of death for James L. Dunn.
3. That Affiant, Judy Dunn, knew at the date of death of the decedent, James L. Dunn, owned an interest in the following described real estate in Davidson County Tennessee. The property is known as 372 Kingview Drive, Nashville, Davidson County Tennessee, bearing the map and parcel number of: 058 16 0 125.00. This real property is further described as:

BILL GARRETT, Davidson County
Trans:T20160103759 AFFIDAVITH
Recvd: 11/23/16 11:55 8 pgs
Fees:42.00 Taxes:0.00
20161123-0123796

Being lot 142 of Haynes Park, Section 4-A of record in Book 4860, page 39, Register's Office for Davidson County, Tennessee to which plan reference is here mad for a more complete description of said lot.

Being the same property conveyed to Greer Investment Company by deed from H. Lynn Greer, Jr. of record in Book 8426, page 14, Register's Office for Davidson County Tennessee.

Being the same property conveyed to James L. Dunn by deed from Greer Investment Company of record in book 9654, page 239, Register's Office for Davidson County, Tennessee.

4. That decedent, James L. Dunn who died on May 17, 2016, was a resident citizen of Davidson County Tennessee at the time of his death.

5. That decedent, James L. Dunn died intestate.

6. That James L. Dunn was not married at the time of his death on May 17, 2106.

7. That the following persons are all the children of the decedent, James L. Dunn, natural or adopted living or deceased:

Judy L. Dunn, 4804 Indian Summer Drive, Nashville, Tennessee 37207.

FURTHER THE AFFIANT SAITH NOT.

JUDY DUNN

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Personally appeared before me, Alexander S. Koval, Notary Public, the within named Judy Dunn 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.

SWORN and SUBSCRIBED to before me on this the 23rd day of Nov, 2016.

NOTARY PUBLIC
MY COMMISSION EXPIRES: 9/10/2018



AFFIDAVIT AS TO HEIRS
(Pursuant to T.C.A. 30-2-712)

State of Tennessee
County of Davidson

On this the 23 day of Nov, 2016, before me personally appeared Darlene McKibbens, to me personally known wo being by me duly sworn on oath did say Affiant is over eighteen (18) years of age, resides at 4804 Indian Summer Drive, Nashville, TN 37207, and is familiar with the family history of James L. Dunn, deceased, who was an owner of the following property: 372 Indian Kingview Drive, Nashville, Davidson County Tennessee.

And that the said James L. Dunn died intestate on the 17th day of May, 2016. Mr. Jams L. Dunn was unmarried at that time, his wife Beulah Dismukes Dunn predeceasing him on September 28, 2006.

And Affiant further states that said deceased left surviving the following persons, as heir or persons otherwise interested in the estate,

1. Judy Dunn
   Daughter of the deceased
   4804 Indian Summer Drive, Nashville, Tennessee 37207

And Affiant further states that the above child is over eighteen (18) years of age and said decedent left no other children or adopted children or descendants of deceased children or adopted children

I further attest that I am a family member of the decedent and knew the history of the family.

Darlene McKibbens

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Personally appeared before me, Alexander S. Koval, Notary Public, the within named Darlene McKibbens, whom I am personally acquainted or was proved to me on the basis of satisfactory evidence, and who acknowledged that he executed the within instrument for the purposes therein contained.

SWORN and SUBSCRIBED to before me on this the 23 day of Nov, 2016.

NOTARY PUBLIC
My commission expires: 9/10/2018

ALEXANDER S. KOVAL
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY
My Commission Expires SEPT. 10, 2018

AFFIDAVIT AS TO HEIRS
(Pursuant to T.C.A. 30-2-712)

State of Tennessee
County of Davidson

On this the 23 day of NoU, 2016, before me personally appeared Trina Smith, to me personally known wo being by me duly sworn on oath did say Affiant is over eighteen (18) years of age, resides at 714 Due West Avenue, Madison, TN 37115, and is familiar with the family history of James L. Dunn, deceased, who was an owner of the following property: 372 Kingview Drive, Nashville, Davidson County Tennessee.

And that the said James L. Dunn died intestate on the 17th day of May, 2016. Mr. Jams L. Dunn was unmarried at that time, his wife Beulah Dismukes Dunn predeceasing him on September 28, 2006.

And Affiant further states that said deceased left surviving the following persons, as heir or persons otherwise interested in the estate,

2. Judy Dunn
Daughter of the deceased
4804 Indian Summer Drive, Nashville, Tennessee 37207

And Affiant further states that the above child is over eighteen (18) years of age and said decedent left no other children or adopted children or descendants of deceased children or adopted children

I further attest that I am a family member of the decedent and knew the history of the family.

Trina Smith

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Personally appeared before me Alexander S. Koval, Notary Public, the within named Trina Smith, whom I am personally acquainted or was proved to me on the basis of satisfactory evidence, and who acknowledged that he executed the within instrument for the purposes therein contained.

SWORN and SUBSCRIBED to before me on this the 23 day of Nov, 2016.

NOTARY PUBLIC
My commission expires: 9/10/2018

ALEXANDER S. KOVAL
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY
My Commission Expires SEPT. 10, 2018

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER

DECEDENT

1. DECEDENT'S LEGAL NAME (First, Middle, Last, Suffix): James Lawrence Dunn
2. SEX: Male
3. DATE OF DEATH (Month, Day, Year): May 17, 2016
4. TIME OF DEATH (Approx.):
5a. AGE-Last Birthday (Years): 86
5b. UNDER 1 YEAR: Months / Days
5c. UNDER 1 DAY: Hours / Minutes
6. DATE OF BIRTH (Month, Day, Year): November 22, 1929
7. BIRTHPLACE (City and State or Foreign Country): Springfield, Tennessee

TYPE/PRINT IN PERMANENT BLACK INK

8a. PLACE OF DEATH (Check only one)
IF DEATH OCCURRED IN A HOSPITAL: [X] Inpatient [X] 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): St. Thomas West
8c. CITY OR TOWN: Nashville
8d. COUNTY OF DEATH: Davidson

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: Retired Teacher
11b. KIND OF BUSINESS/INDUSTRY: Education

12. SOCIAL SECURITY NUMBER: [redacted]-8352
13a. RESIDENCE-STATE OR FOREIGN COUNTRY: Tennessee
13b. COUNTY: Davidson
13c. CITY OR TOWN: Nashville
13d. STREET AND NUMBER: 4540 Clarksville Highway
13e. INSIDE CITY LIMITS: [X] Yes [ ] No
13f. ZIP CODE: 37218
14. WAS DECEDENT EVER IN US ARMED FORCES? [ ] Yes [X] No

NAME OF DECEDENT (For use by Physician or Medical Examiner)

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)
[ ] Bachelor's degree (e.g., BA, AB, BS)
[X] 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)
[ ] White
[X] 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): Willie T. Dunn, Jr.
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last): Cleora Holland

DISPOSITION

20a. INFORMANT'S NAME: Judy Dunn
20b. RELATIONSHIP TO DECEDENT: Daughter
20c. MAILING ADDRESS (Street and Number, City, State, Zip Code): 4540 Clarksville Hwy, Nashville, Tennessee 37218
21a. METHOD OF DISPOSITION: [ ] Donation [X] Entombment [ ] Other (Specify) / [ ] Burial [ ] Cremation [ ] Removal from State
21b. PLACE OF DISPOSITION (Name of cemetery, crematory, other place): Forest Lawn Memorial Gardens
21c. LOCATION - City or Town and State: Goodlettsville, Tennessee
22a. SIGNATURE OF FUNERAL DIRECTOR: ▶ Richard A. Lewis
22b. LICENSE NUMBER: 3633
22c. SIGNATURE OF EMBALMER: ▶ Patrick Tucker
22d. LICENSE NUMBER: 5072
23a. NAME AND ADDRESS OF FUNERAL HOME: Lewis & Wright Funeral Directors 2500 Clarksville Pk. Nashville, TN 37208
23b. LICENSE NUMBER OF FUNERAL HOME: 0812

REGISTRAR

24. REGISTRAR'S SIGNATURE: ▶ [signature] DR
25. DATE FILED (Month, Day, Year): 5/23/16

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: ▶ Benjamin Martel BenMartelMD
27b. LICENSE NUMBER: TN 43337
27c. DATE SIGNED (Month, Day, Year): 5/20/16
27d. NAME AND ADDRESS: 4220 Harding Rd suite 500 Nashville, Tn 37205

MEDICAL CERTIFICATION

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.	Mesenteric Ischemia	weeks
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. Due to (or as a consequence of)		
c. Due to (or as a consequence of)		
d.		

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

28a. WAS AN AUTOPSY PERFORMED? [ ] Yes [X] No
28b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? [ ] Yes [ ] No

29. MANNER OF DEATH: [X] Natural [ ] Homicide [ ] Accident [ ] Pending Investigation [ ] Suicide [ ] Could not be determined
30. DID TOBACCO USE CONTRIBUTE TO DEATH? [ ] Yes [ ] Probably [ ] No [X] Unknown
31. 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. 10/2011) RDA 1399

8513407

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.

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

R. Benton McDonough, JD
STATE REGISTRAR

John J. Dreyzehner, MD, MPH, FACOEM
COMMISSIONER

8513407 9/2/2016
Date Issued

CERTIFICATION OF VITAL RECORD