This Instrument Prepared by:
Bryan C. De Cuir, Attorney at Law
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Bill Garrett Davidson County
Batch# 66692 AFFIDAVITH
03/08/2018 02:43:30 PM 3 pgs
Fees: $17.00 Taxes: $0.00
20180308-0022106

AFFIDAVIT OF HEIRSHIP

The undersigned, being first duly sworn, deposes and says as follows:

1. I am an adult, a U.S. citizen, a resident of Davidson County, Tennessee, and the surviving spouse of H. C. Riddle.

2. At the time of his death, H.C. Riddle and I held title, as tenants by the entirety, to the improved real property commonly known as 236 Fairway Drive, Donelson, Tennessee 37214, by virtue of the Warranty Deed from Deon Shuck, dated August 16, 1982 and recorded in book 5925, page 757, Register's Office for Davidson County, Tennessee.

3. Upon decedent's death I succeeded to all of his interest in said property as his surviving spouse

4. Decedent died intestate, but with personal property valued at less than $50,000.00, and therefore was exempt from Probate under the provisions of Section 30-4-101 of the Probate Code.

5. This Affidavit is freely given pursuant to the provisions of Tennessee Code Annotated Section 30-2-712, to help establish the heirship with respect to any real or personal property owned by the decedent H. C. Riddle in Davidson County, Tennessee, or elsewhere.

I make the above statements based on my own personal knowledge, and to the best of my knowledge and belief these statements are true, correct and complete.

IN WITNESS WHEREOF, the undersigned has executed this Affidavit as of the 21st day of February, 2018.

JUANITA J. RIDDLE

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Personally appeared before me, the undersigned, a Notary Public in and for said County and State, the within named **JUANITA J. RIDDLE** 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 21st day of February, 2018.

Notary Public

[SEAL]

JANA DRURY
STATE OF TENNESSEE NOTARY PUBLIC
COUNTY OF SUMNER

My Commission Expires: January 29, 2020

My Comm. Expires
January 29, 2020
201803080022106

STATE OF TENNESSEE
DEPARTMENT OF HEALTH AND ENVIRONMENT
CORDELL HULL BUILDING
NASHVILLE, TENNESSEE 37219-2505

I hereby certify the below to be a true and correct copy of the official document on file in this department. Valid ONLY when embossed seal of the Tennessee Department of Health and Environment and red imprinted signature of the State Registrar are affixed.

JAN 18 1988 Paula Taylor REGISTRAR

Paula Taylor
State Registrar

CERTIFICATE OF DEATH

TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT
VITAL RECORDS

8704827 — IS BECOMES A LEGAL CORD WHEN PROPERLY EXE- T'D AND FILED.

19094 28 1947 — BIRTH NO.

87-033614 — STATE FILE NO.

PE OR PRINT IN RMANENT BLACK INK.

DECEASED—NAME: Hubert	Carl	Riddle	DATE OF DEATH: October 20, 1987	
AGE—LAST BIRTHDAY (YEARS): 56	UNDER 1 YEAR: MONTHS / DAYS	UNDER 1 DAY: HOURS / MIN.	DATE OF BIRTH: 3/17/1931	RACE: White
JAPAN OR DESCENT—ITALIAN, GERMAN, ETC. SPECIFY: American	SEX: Male			
COUNTY OF DEATH: Davidson	CITY, TOWN OR LOCATION: Nashville	INSIDE CITY LIMITS: Yes	HOSPITAL OR OTHER INSTITUTION—NAME: Vanderbilt Hospital	D.I.E.
STATE OF BIRTH: Tennessee	CITIZEN OF WHAT COUNTRY: U.S.A.	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED: Married	SURVIVING SPOUSE: Juanita Johnson	
SOCIAL SECURITY NUMBER: 409-46-2861	SERVICE IN ARMED FORCES: WWII	USUAL OCCUPATION: President/Owner 019	KIND OF BUSINESS OR INDUSTRY: Interstate Paving Co. B	
RESIDENCE—STATE: Tennessee	COUNTY: Davidson	CITY, TOWN, OR LOCATION: Nashville	STREET AND NUMBER: 2457 Cabin Hill Rd	INSIDE CITY LIMITS: yes
CENSUS TRACT NO				
FATHER—NAME: Andrew Jackson Riddle	MOTHER—MAIDEN NAME: Ruth Wells	INFORMANT—NAME: Juanita Riddle	MAILING ADDRESS: 2457 Cabin Hill Rd Nashville, Tn. 37214	
BURIAL, CREMATION, REMOVAL, OTHER (SPECIFY): Burial	DATE: 10/23/1987	CEMETERY OR CREMATORY—NAME: Whittaker Cem.	LOCATION: Monterey, Tennessee	
FUNERAL DIRECTOR (SIGNATURE): David Horner	LICENSE NO: 3019	EMBALMER (SIGNATURE): Horner Funeral	LICENSE NO: 2182	
FUNERAL HOME—NAME AND ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP): Horner Funeral Home, Inc. 203 Holly Monterey, Tn. 38574	REGISTRAR (SIGNATURE): Esther D. Grah	DATE RECEIVED BY LOCAL REGISTRAR: 10-26-87		

PHYSICIAN—CERTIFY THAT THE DEATH OCCURRED AT THE PLACE ON THE DATE, AND DUE TO THE CAUSE(S) STATED — SIGNATURE — DEGREE — DATE SIGNED

MEDICAL EXAMINER—ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR THE INVESTIGATION, DEATH OCCURRED ON THE DATE AND DUE TO THE CAUSE(S) STATED — SIGNATURE: I. E. Simpkins M.D. — DATE SIGNED: 10/22/87

CERTIFIER—NAME (TYPE OR PRINT): T.E.Simpkins, M.D. — MAILING ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP): 84 Hermitage Ave.,Nashville,TN 37210-2110

25 PART I DEATH WAS CAUSED BY — ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c). — INTERVAL BETWEEN ONSET AND DEATH

(a) IMMEDIATE CAUSE: MULTIPLE TRAUMA
(b) DUE TO, OR AS A CONSEQUENCE OF:
CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST
(b) CRUSHED CHEST — 1 hr
DUE TO, OR AS A CONSEQUENCE OF:
(c)

PART II OTHER SIGNIFICANT CONDITIONS CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a) — AUTOPSY (YES OR NO): 26 No

ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY): 27a Accident	DATE OF INJURY (MONTH DAY YEAR): 27b 10/20/87	HOUR: 27c M	DESCRIBE HOW INJURY OCCURRED: 27d Pedestrian struck by automobile
INJURY AT WORK (SPECIFY YES OR NO): 27e No	PLACE OF INJURY (AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. SPECIFY): 27f Interstate	LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, STATE): 27g I-24 & Bell Rd.,Nashville, TN	

DEATH NOT ATTENDED BY YSICIAN AUTHORIZED OF CIAL SIGN HERE ANY YSICIAN OR MEDICAL EX INER EXECUTING CER ICATE MUST COMPLETE D SIGN MEDICAL CER FICATION WITHIN 48 URS POWER OF GNATURE CANNOT BE LEGATED

PH-1650 Rev. 9/81 CRC

201803080022106

Certificate of Authenticity

I, BRYAN C. DECUIR, do hereby make oath that I am a licensed attorney and/or the custodian of the electronic version of the attached document tendered for registration herewith and that this is a true and correct copy of the original document executed and authenticated according to law.

Signature

State of TENNESSEE

County of DAVIDSON

Personally appeared before me, ~~BRYAN C. DECUIR~~ STEVEN A. MOCK, a notary public for this county and state, BRYAN C. DE CUIR who acknowledges that this certification of an electronic document is true and correct and whose signature I have witnessed.

Notary's Signature

STEVEN A. MOCK
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY

My Commission Expires: 7/8/18.

Notary's Seal (If on paper)