THIS INSTRUMENT PREPARED BY: **Martin Heller Potempa & Sheppard** 2122 21st Avenue South Nashville, Tennessee 37212 (615) 800-7096 Karen Johnson Davidson County Batch# 222005 **AFFIDAVITH** 04/25/2019 10:45:40 AM 7 pgs Fees: $37.00 Taxes: $0.00 20190425-0038158	STATE OF TENNESSEE COUNTY OF DAVIDSON The actual consideration for this transfer is: $0.00 William H. Stannard Subscribed and sworn to before me, this 4 day of April 2019. NOTARY PUBLIC My Commission Expires: 11·8·2022

CAMILLE FUSTON STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON COUNTY MY COMMISSION EXPIRES 11-8-2022

Address New Owner:	**Send Tax Bills To:**	**Tax Information:**
William H. Stannard 1272 General George Patton Road Nashville, TN 37221	New Owner	Map & Parcel: 142 09 0E 071.00

AFFIDAVIT OF HEIRSHIP

1. My name is William H. Stannard ("Affiant"). I am an adult resident of the State of Tennessee. I am competent to give the testimony in this sworn Affidavit, and my testimony herein is based upon my personal knowledge.

2. Frances Ameila Stannard ("Decedent") died on August 18, 2018. A copy of the Certificate of Death is attached as **Exhibit 1.**

3. Decedent had an ownership interest in a certain parcel of improved real property at the time of death, which is located at 1272 General George Patton Road, Nashville, TN 37221(the "Property") and more fully and particularly described as follows:

> Unit No 1272, together with the Carport designated No. 1272-C, in River Plantation, Section Seven, a Condominium, a Horizontal Property Regime, located on Sawyer Brown Road and General George Patton Road, Nashville, Davidson County, Tennessee, as shown on the plat of River Plantation, Section Seven, Condominium Apartments, recorded in Book 5200, pages 705 and 706, Register's Office for Davidson County, Tennessee, and described in a Master deed recorded in Book 6226, page 9, Register's Office for Davidson County, Tennessee, to which reference is hereby made. The easements, restrictive covenants, conditions and regulations imposed upon and relating to the apartments,

property, co-owners and tenants of River Plantation, Section Seven, Condominiums apartments, contained in the aster Deed and By-Laws appended thereto, recorded in Book 6226, page 9, Register's Office for Davidson County Tennessee, are incorporated in this deed by reference and made a part hereof the same as though copied herein.

This is improved property known as 1272 General George Patton Road, Nashville, Tennessee.

Being the same property conveyed to Frances. A Stannard by warranty deed from Haury & Smith Contractors, Inc., dated June 27th, 1986, recorded on July 1, 1986, of record book 6905, page 240 in the Register's Office of Davidson County, Tennessee.

5. Decedent died unmarried and without a valid will. Decedent had two (2) sons, William H. Stannard (Affiant) and Richard M. Stannard, Jr. Therefore, Affiant and Richard M. Stannard, Jr. are the sole heirs-at-law pursuant to Tenn. Code Ann. §31-2-104.

6. A Probate Estate has not been opened, and it is not anticipated that one will be opened.

7. Decedent was not on TennCare at the time of death and/or a release has been received by Tenncare and is being filed contemporaneously with this affidavit. See **Exhibit 2.**

7. Pursuant to Tenn. Code Ann. § 31-2-103, Decedent's interest in the Property vested in Affiant and Richard Stannard immediately upon death. As of the filing of this Affidavit, ownership of the Property remains vested as tenants in common as follows:

William H. Stannard – 50%
Richard M. Stannard, Jr. – 50%

FURTHER AFFIANT SAYETH NOT.

SWORN this 1st day of April, 2019.

William Stannard
William Stannard

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STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

Now having first been sworn, the above-named William Stannard, Affiant, appeared before me and proved his identity to me by a government issued photograph identification card, and gave the testimony in this Affidavit for the purpose(s) stated herein.

Sworn to and subscribed before me, the undersigned Notary Public, this 4 day of April, 2019.

Camille Fuston
Notary Public

My commission expires: 11-8-2022

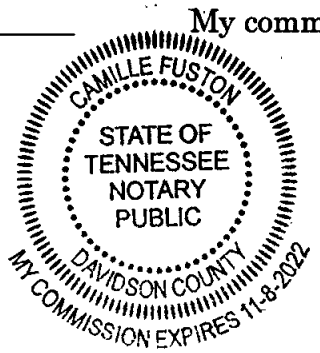


EXHIBIT 1

(Death Certificate of Frances Stannard)

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2018 045981

TYPE/PRINT IN PERMANENT BLACK INK

1. DECEDENT'S LEGAL NAME: FRANCES AMELIA STANNARD				2. SEX: FEMALE	3. DATE OF DEATH: 08/18/2018
4. TIME OF DEATH (24 hours): 04:45 PM	5a. AGE: 93	5b. UNDER 1 YEAR: Months / Days	5c. UNDER 1 DAY: Hours / Minutes	6. DATE OF BIRTH: 05/31/1925	7. BIRTHPLACE: WATERBURY, CT
8a. PLACE OF DEATH: NURSING HOME/LONG TERM CARE					
8b. FACILITY NAME: WEST MEADE PLACE LLP		8c. CITY OR TOWN: NASHVILLE			8d. COUNTY OF DEATH: DAVIDSON
9. MARITAL STATUS: WIDOWED	10. SURVIVING SPOUSE (name prior to first marriage)		11a. DECEDENT'S USUAL OCCUPATION: SECRETARY		11b. KIND OF BUSINESS/INDUSTRY: NON-PROFIT
12. SOCIAL SECURITY NUMBER: 1-7701	13a. RESIDENCE-STATE OR FOREIGN COUNTRY: TENNESSEE		13b. COUNTY: DAVIDSON		13c. CITY OR TOWN: NASHVILLE
13d. STREET AND NUMBER: 1000 ST LUKE DR ROOM 3036		13e. INSIDE CITY LIMITS?: YES	13f. ZIP CODE: 37205		14. WAS DECEDENT EVER IN US ARMED FORCES?: NO
15. DECEDENT'S EDUCATION: BACHELOR'S DEGREE	16. DECEDENT OF HISPANIC ORIGIN?: NO, NOT SPANISH/HISPANIC/LATINO		17. DECEDENT'S RACE: WHITE		
18. FATHER'S NAME: UNKNOWN			19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE: MARIA DONANIA		
20a. INFORMANT'S NAME: RICHARD STANNARD	20b. RELATIONSHIP TO DECEDENT: SON		20c. MAILING ADDRESS: 40 COMSTOCK RIDGE RD, COLCHESTER, CT 06415		
21a. METHOD OF DISPOSITION: DONATION	21b. PLACE OF DISPOSITION: VANDERBILT UNIVERSITY MEDICAL CENTER		21c. LOCATION: NASHVILLE, TN		
22a. SIGNATURE OF FUNERAL DIRECTOR: /e/ NONE NONE	22b. LICENSE NUMBER: 0000	22c. SIGNATURE OF EMBALMER		22d. LICENSE NUMBER	
23a. NAME AND ADDRESS OF FUNERAL HOME: VUMC ANATOMICAL DONATION PROGRAM, 2213 GARLAND AVE., NASHVILLE, TN 37232				23b. LICENSE NUMBER: 0000	
24. REGISTRAR'S SIGNATURE: /e/ EDWARD G. BISHOP III		25. DATE FILED: 08/21/2018			

26. CERTIFIER

26a. ☒ PHYSICIAN – TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE DATE, TIME, 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, TIME, 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. CERTIFIER	27b. LICENSE NUMBER	27c. DATE SIGNED
/e/ RICHARD GARMAN	013402	08/20/2018

27d. NAME AND ADDRESS: RICHARD GARMAN, 300 20TH AVE N 9TH FLOOR, NASHVILLE, TN 37088

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). 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	a. INANITION	
	DUE TO (OR A CONSEQUENCE OF) b. DYSPHAGIA	
	DUE TO (OR A CONSEQUENCE OF) c. CEREBRAL VASCULAR ACCIDENT	
	DUE TO (OR A CONSEQUENCE OF) d. CHRONIC ATRIAL FIBRILLATION	

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I: FALL ON 8/7/2018 RESULTING IN LEFT INTERTROCHANTERIC HIP FRACTURE

29a. WAS AN AUTOPSY PERFORMED?: NO

29b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?

30. MANNER OF DEATH: NATURAL	31. DID TOBACCO USE CONTRIBUTE TO DEATH?: NO	32. IF FEMALE: NOT PREGNANT WITHIN PAST YEAR

33. IF TRANSPORTATION INJURY, SPECIFY:	34a. DATE OF INJURY	34b. TIME OF INJURY	34c. INJURY AT WORK?	34d. PLACE OF INJURY
	34e. DESCRIBE HOW INJURY OCCURRED		34f. LOCATION OF INJURY	

10347671

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.

Edward G. Bishop III
State Registrar

John J. Dreyzehner, MD, MPH, FACOEM
COMMISSIONER

1 0 3 4 7 6 7 1

Date Issued SEP 04 2018

CERTIFICATION OF VITAL RECORD

EXHIBIT 2

(TennCare release for Frances Stannard)

State of Tennessee
Department of Finance and Administration
Bureau of TennCare
Third Party Liability Division
310 Great Circle Road, 4th Floor
Nashville, Tennessee 37243
Toll Free: 866-389-8444 • FAX: 615-413-1941

Bill Haslam
Governor

Larry B. Martin
Commissioner

4/10/2019

ADAM BARBER
LEGAL COUNSEL
2122 21ST AVENUE SOUTH
NASHVILLE, TN 37212

RE: FRANCES STANNARD
Last Four Of SSN 7701

Dear ADAM BARBER:

The Division of TennCare releases its claim against the probate estate of the above decedent for the marked reason:

X T.C.A. §71-5-116(c) (2) - Based upon a review of the information you provided, we do not find long-term TennCare benefits paid by the State of Tennessee on behalf of the decedent

____ T.C.A. §71-5-116(c) - The decedent is survived by a spouse; therefore, the claim is deferred. TennCare reserves the right to assert a claim upon the death of the surviving spouse.

____ T.C.A. §71-5-116(c) - The decedent was under the age of fifty-five at the time of death; therefore, the estate recovery claim is waived.

If there are questions, you may contact the Estate Recovery Unit at (866) 389-8444.

Note this release only applies to decedent's probate estate and does not apply to trusts or any assets held in trust. For trust inquires, please contact us by phone for referral to TennCare's Office of the General Counsel.

Sincerely,

Jangela J. Howard