**********

**ADDRESS NEW OWNER:**
James Cunningham
1730 Vigard Drive
Solvang, CA 93463

**SEND TAX BILL TO:**

**Map-Parcel No.**
042 11 0 010.00

**********

This Instrument Prepared By:
**PAULA OGLE BLAIR, ATTORNEY AT LAW**
211 Donelson Pike, Suite 214, Nashville, Tennessee 37214
FROM INFORMATION BY OTHERS

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Karen Johnson Davidson County
Batch# 404481 **AFFIDAVITH**
05/22/2020 08:08:04 AM 4 pgs
Fees: $22.00 Taxes: $0.00

20200522-0053273

## AFFIDAVIT OF HEIRSHIP

**STATE OF TENNESSEE )**
**COUNTY OF DAVIDSON )**

Edwin E. Rowell, being of lawful age and a resident of the State of Tennessee for the past six (6) months, being first duly sworn according to law, and, pursuant to Tennessee Code Annotated § 30-2-712, hereby swears to the following of his own free will and based upon his personal knowledge and familiarity with Walter Myers Cunningham, Jr.

1. Walter Myers Cunningham, Jr. died on April 16, 2020. A Death Certificate is attached to this Affidavit.

2. At the time of his death, Walter Myers Cunningham, Jr. owned a sole interest in property located 500 North Graycroft Avenue, Madison, Tennessee 37115 and more particularly described as follows:

> **LAND in Davidson County, Tennessee, BEING Lot No. 56 on the Map of Morning View Subdivision, Section IV, of record in Book 2330, page 40, Register's Office for Davidson County, Tennessee, to which Plan reference is hereby made for a complete and accurate description of said Lot.**

**SAID Lot NO. 56 fronts 205.47 feet on the westerly side of Graycroft Road, and runs back 215.75 feet on the northerly side and 258.50 feet along a broken line on the southerly side, to a dead line in the rear on which it measures 117.45 feet.**

**BEING the same property conveyed to Walter M. Cunningham, by Warranty Deed from Wylie Wayne Swindle and wife, Jane C. Swindle, by Instrument Number 20040525-0061265, Register's Office for Davidson County, Tennessee.**

**This conveyance is subject to taxes for the year 2004, and subsequent years, easements and restrictive covenants of record.**

3. Walter Myers Cunningham, Jr. died intestate.

4. Walter Myers Cunningham, Jr. was unmarried at the time of his death.

5. Walter Myers Cunningham Jr. had no children.

6. Walter Myers Cunningham, Jr.'s parents are deceased.

7. Walter Myers Cunningham, Jr.'s heir-at-law are his siblings, James Cunningham and Sandra Tugrul.

8. This Affidavit will confirm that Walter Myer's Cunningham, Jr.'s ownership interest in the real property located at 500 North Graycroft Avenue, Madison, Tennessee 37115 and described herein, is hereby transferred to and vested in James Cunningham and Sandra Tugrul as tenants in common.

9. Walter Myers Cunningham, Jr. and Walter M. Cunningham are one and the same.

**FURTHER AFFIANTS SAYETH NAUGHT**

EDWIN E. ROWELL

Sworn to and subscribed before me this 18th day of MAY 2020.

Anna M. Whaley
NOTARY PUBLIC

ANNA M. WHALEY
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY
MY COMMISSION EXPIRES 11-8-2022

My commission expires: November 8, 2022

**NOTE: THIS DOCUMENT WAS EXECUTED IN COMPLIANCE WITH EXECUTIVE ORDER 26 BY TENNESSEE GOVERNOR BILL LEE ON APRIL 9, 2020**

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH
STATE FILE NUMBER 2020 027449

| | | | | |
|---|---|---|---|---|
| 1. Decedent's Legal Name: WARNER MYERS DUNNINGHAM JR | | | 4. Sex: MALE | 5. Date of Death: 04/18/2020 |
| 2. Date of Death (Current): 04/18/2020 | 3. Age: 85 | 6. Date of Birth: 01/09/1935 | 7. Birthplace: DETROIT, MI | |
| 8a. Place of Death: RESIDENTS HOME | | | | |
| 8b. Facility Name: 500 N GRAYCROFT AVE | | 8c. City or Town: MADISON | 8d. County of Death: DAVIDSON | |
| 9. Marital Status: NEVER MARRIED | 10. Surviving Spouse (name prior to first marriage) | 11a. Decedent's Usual Occupation: MUSICIAN | 11b. Kind of Business/Industry: MUSIC | |
| 12. Decedent's Residence (State): TENNESSEE | 13. Residence State or Foreign Country | 13b. County: DAVIDSON | 13c. City or Town: MADISON | |
| 13d. Street and Number: 500 N GRAYCROFT AVE | | 13e. Inside City Limits?: YES | 13f. Zip Code: 37115 | 13g. Was decedent ever in US Armed Forces?: NO |
| 14. Decedent's Education: HIGH SCHOOL GRAD/DATE OR GED COMPLETED | 15. Decedent of Hispanic Origin?: NO, NOT SPANISH/HISPANIC/LATINO | 16. Decedent's Race: WHITE | | |
| 17. Father's Name: PASTOR MYERS DUNNINGHAM,SR | | 18. Mother's Name Prior to First Marriage: VIDA PERN HALE | | |
| 19a. Informant's Name: JAMES LEE CUNNINGHAM | 19b. Relationship to Decedent: BROTHER | 19c. Mailing Address: 1739 VIGARD DR., SOLVANG, CA 93463 | | |
| 20a. Method of Disposition: CREMATION | 20b. Place of Disposition: HAITH & CREMATORY | 20c. Location: NASHVILLE, TN | | |
| 20d. Name of Funeral Service Licensee: H. JONES MONTGOMERY | 20e. License Number: 6345 | 20f. Signature of Embalmer: ▶ | 20g. License Number: | |
| 20h. Name and Address of Funeral Home: ALTERNATIVE CREMATION AND FUNERAL SERVICE, 2068 COOL SPRINGS BLVD, STE 201, FRANKLIN, TN 37067 | | | 20i. License Number: 1292 | |
| 21a. Informant's Signature: ▶ WEBSTER'S BISHOP III | | 21b. Date Filed: 05/13/2020 | | |
| 22. Certifier: 22a. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE DATE, TIME AND PLACE, AND DUE TO THE CAUSE(S) AND MANNER STATED. 22b. 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. | | | | |
| 22a. Certifier: ▶ WILLIAM ROBERT SINGH BOWMAN | | 22b. License Number: 367 | 22c. Date Signed: 05/11/2020 | |
| 22d. Name and Address: BURNLEY SINGH BOWMAN 850 R. S. GASS BLVD., NASHVILLE, TN 37216 | | | | |

23a. Part I. ENTER SEQUENCE 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. GUNSHOT WOUND OF THE HEAD | |
| Sequentially list conditions, if any, leading to the immediate cause. Enter UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST. | b. | |
| | c. | |
| | d. | |

Part II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I.

23c. Was an Autopsy Performed?: YES
23d. Were Autopsy Findings Available to Complete the Cause of Death?: YES

| 24. Manner of Death | 25. Did Tobacco Use Contribute to Death? | 26. If Female: |
|---|---|---|
| SUICIDE | UNKNOWN | N/A |

| 27. If Transportation Injury, Specify: | 28a. Date of Injury: UNKNOWN | 28b. Time of Injury: UNKNOWN | 28c. Injury at Work?: NO | 28d. Place of Injury: RESIDENCE |
|---|---|---|---|---|
| | 28e. Describe How Injury Occurred: SHOT SELF | | | 28f. Location of Injury: 500 N GRAYCROFT AVE, MADISON, TN |

VS-T-10.8 (Rev. 8/2017) — VSA 10.8

12331700

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

Lisa Piercey, MD, MBA, FAAP
Commissioner

Date Issued: 05/14/2020

CERTIFICATION OF VITAL RECORD