This instrument was prepared by:
Alexander S. Fasching
Russ Cook & Associates, P.C.
5141 Virginia Way, Suite 220
Brentwood, TN 37027

Karen Johnson Davidson County
Batch# 423178 AFFIDAVITH
06/22/2020 02:48:35 PM 3 pgs
Fees: $17.00 Taxes: $0.00
20200622-0066936

NEW OWNER(S): MEGAN P. REESE
717 SUGAR MILL TRL.
NASHVILLE, TN 37211

SEND TAX NOTICES TO: MEGAN P. REESE
717 SUGAR MILL TRL.
NASHVILLE, TN 37211

PARCEL ID: **181 01 0B 034.00**

AFFIDAVIT OF HEIRSHIP

Tennessee Code Annotated § 30-2-712

STATE OF TENNESSEE
COUNTY OF Williamson

The undersigned, being duly sworn, makes oath as follows:

1. My full name is Daniel Reese ("Affiant").
2. I reside at 717 Palmetto Blvd., Brentwood, TN 37027.
3. I have personal knowledge of the matters stated in this Affidavit; I am a brother of the decedent.
4. Robert R. Reese died intestate in Nashville, Davidson County, Tennessee on February 23, 2020. A Death Certificate for Robert R. Reese is attached as Exhibit A.
5. At the time of the Decedent's death, the Decedent resided at 717 Sugar Mill Trail, Nashville, TN 37211.
6. The estate of the Decedent was not administered in a proceeding supervised by a court.
7. Decedent was survived by his wife, Megan P. Reese.

8. The real property to which this Affidavit applies is located in Davidson County, Tennessee, at 717 Sugar Mill Trail, Nashville, TN 37211, legally described as:

   Land in Davidson County, Tennessee, being Lot Number 173 on the Plan of Section One Addition to Sugar Valley of record in Instrument Number 200307080093537, Register's Office for Davidson County, Tennessee, to which plan reference is hereby made for a more complete and accurate legal description of said lot.

   Being the same property conveyed to Robert. R. Reese, a married man, by Warranty Deed from Andrea Celeste Hutton and husband, David Hutton, recorded in Instrument Number 201104150029372, Register's Office for Davidson County, Tennessee.

9. Affiant has executed this *Affidavit of Heirship* in order to evidence the transfer of Decedent's interest in the real property to his heir-at-law.

10. Facts pertinent to determine who is legally entitled to the estate of the Decedent at the time of the Decedent's death are:

    a. Robert R. Reese was married at the time of his death, his wife being Megan P. Reese. Decedent had no children.

    b. The Decedent's wife, Megan P. Reese, now owns this property in its entirety.

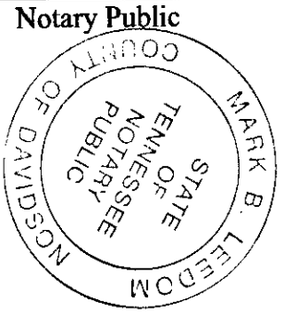
Signed this 12th day of June, 2020, by:

Daniel Reese, Affiant

Sworn to and subscribed before me by Daniel Reese, this 12th day of June, 2020.

Notary Public

My Commission expires: 9/7/21



STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2020 011057

1. Decedent's Legal Name: ROBERT RYAN REESE			2. Sex: MALE	3. Date of Death: 02/23/2020
4. Time of Death: 04:10 AM	5a. Age: 74	6. Date of Birth: 04/01/1945	7. Birthplace: NASHVILLE, TN	
8a. Place of Death: DECEDENT'S HOME				
8b. Facility Name: 717 SUGAR MILL TRAIL		8c. City or Town: NASHVILLE		8d. County of Death: DAVIDSON
9. Marital Status: MARRIED	10. Surviving Spouse (name prior to first marriage): MEGAN PINKERMAN	11a. Decedent's Usual Occupation: VICE PRESIDENT		11b. Kind of Business/Industry: FAMILY FOOD BROKERAGE
12. Social Security Number: 411-65-0882	13a. Residence State or Foreign Country: TENNESSEE	13b. County: DAVIDSON		13c. City or Town: NASHVILLE
13d. Street and Number: 717 SUGAR MILL TRAIL		13e. Inside City Limits? YES	13f. Zip Code: 37211	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: DARRELL BAXTER REESE			19. Mother's Name Prior to First Marriage: LYVONN ONEAL	
20a. Informant's Name: MEGAN REESE	20b. Relationship to Decedent: WIFE	20c. Mailing Address: 717 SUGAR MILL TRAIL, NASHVILLE TN 37211		
21a. Method of Disposition: CREMATION	21b. Place of Disposition: WOODFIN FUNERAL CHAPEL		21c. Location: MURFREESBORO TN	
22a. Signature of Funeral Director: /s/ TODD RANDALL HOWELL	22b. License Number: 5864	22c. Signature of Embalmer:	22d. License Number:	
22e. Name and Address of Funeral Home: WOODFIN FUNERAL CHAPEL INC 1486 LASCASSAS PIKE MURFREESBORO TN 37130			22f. License Number: 179	
24. Registrar's Signature: /s/ EDWARD G BISHOP III		25. Date Filed: 02/27/2020		

26. Certifier
26c. ☐ 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.

27a. Certifier: /s/ GULPREET SINGH BOWMAN	27b. License Number: 3471	27c. Date Signed: 02/27/2020
27d. Name and Address: GULPREET SINGH BOWMAN 650 R. S. GASS BLVD NASHVILLE TN 37216		

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	
	b.	
UNDERLYING CAUSE (Disease or injury that initiated the events resulting in death) LAST	c.	
	d.	

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

29a. Was an Autopsy Performed?

29b. Were Autopsy Findings Available to Complete the Cause of Death?

30. Manner of Death: PENDING INVESTIGATION	31. Did Tobacco Use Contribute to Death?	32. If Female: N A		
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

VS-41 (Rev. 8/2017) RCA 10/12

11790699

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

1 1 7 9 0 6 9 9

Date Issued Feb-27-2020

CERTIFICATION OF VITAL RECORD