****

ADDRESS NEW OWNER:	**SEND TAX BILL TO:**	**Map-Parcel No.**
Daniel F. Syriac	**Same**	Map 75-4 #25
4529 Andrew Jackson Parkway		Parcel 4D-24401
Hermitage, TN 37076		

****

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

Karen Johnson Davidson County
Batch# 571713 **AFFIDAVITH**
02/10/2021 11:04:10 AM 13 pgs
Fees: $67.00 Taxes: $0.00

20210210-0018959

AFFIDAVIT OF HEIRSHIP

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Comes the Affiant, ~~Edward~~ Eddie Chisholm, 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 F. Fagan Thompson, Jr.:

1. F. Fagan Thompson, Jr. died on December 28, 2018. A Death Certificate is attached to this Affidavit as Exhibit One.
2. Affiant is the alternate Executor of the Last Will and Testament of F. Fagan Thompson, Jr., after the Tennessee Department of Labor and Workforce Development Credit Union declined to serve. See Exhibit Two.
3. The Probate Court for Davidson County, Tennessee entered an Order on November 6, 2020, naming ~~Edward~~ Eddie Chisholm as said Executor. See Exhibit Three.
4. At the time of his death, F. Fagan Thompson, Jr was unmarried.

5. At the time of his death, F. Fagan Thompson, Jr owned an interest in property located at 4529 Andrew Jackson Parkway in Hermitage, Davidson County, and more particularly described as follows:

Land in Davidson County, Tennessee, being Lot No. 111 on the Plan of Tulip Grove, Section 3, as of record in Book 3700, page 146, Register's Office for Davidson County, Tennessee.

Said Lot No, 111 fronts 100.0 feet on the southeasterly margin of Andrew Jackson Parkway and runs back between lines measuring 154.10 feet on the northeasterly line and 158.46 feet on the southwesterly line to a dead line in the rear measuring 108.34 feet thereon.

Being the same property conveyed to F. Fagan Thompson, Jr. by Warranty Deed from Jerry A. Clay and wife, Rita L. Clay, signed on June 29, 1981, of record in Book 5269, page 538, Register's Office for Davidson County, Tennessee.

The Warranty Deed transferring title to F. Fagan Thompson, Jr. contained the following language: It is understood and agreed that part of the consideration for the transfer of this property is the agreement of the grantees to assume the unpaid balance of a note secured by a first mortgage Deed of Trust of record in Book 5765, page 140, Register's Office for Davidson County, Tennessee, and also that the escrow account in connection with the aforesaid Deed of Trust is hereby transferred to said grantees.

6. F. Fagan Thompson, Jr had no children at the time of his death. Randy Scoggin, Kathryn Scogin Harvey, Jean Ann Scogin and Robert Joseph Scogin, Jr.are Decedent's heirs-at-law. However, the Will named one beneficiary, Daniel F. Syriac.

7. The real property described herein was bequeathed to Daniel F. Syriac, as per the Last Will and Testament of F. Fagan, Thompson, Jr. (see Exhibit Four)

8. This Affidavit will confirm F. Fagan Thompson, Jr 's ownership interest in the real property described herein is vested in Daniel F. Syriac.

FURTHER AFFIANTS SAYETH NAUGHT

MONA L. BUNKER
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY

Eddie Chisholm

Eddie ~~EDWARD~~ CHISHOLM
EXECUTOR OF THE ESTATE OF
F. FAGAN THOMPSON, JR.

Sworn to and subscribed before me this 21st day of January, 2021.

Mona L Bunker
NOTARY PUBLIC

My commission expires: May 07, 2024

Copy

STATE OF TENNESSEE
Office of Vital Records

1200079 — TENNESSEE DEPARTMENT OF HEALTH — **CERTIFICATE OF DEATH** — STATE FILE NUMBER

[redacted]

1. DECEDENT'S LEGAL NAME (First, Middle, Last, Suffix): F. Fagan Thompson, Jr.
2. SEX: Male
3. DATE OF DEATH (Month, Day, Year): January 09, 2012
4. TIME OF DEATH (Actual): 7:26 AM
5a. AGE-Last Birthday (Years): 73
5b. UNDER 1 DAY — Months / Days / Hours / Minutes:
6. DATE OF BIRTH (Month, Day, Year): November 26, 1938
7. BIRTHPLACE (City and State or Foreign Country): Nashville, Tennessee

TYPEWRITE OR PERMANENT BLACK INK

8a. PLACE OF DEATH (Check only one)
IF DEATH OCCURRED IN A HOSPITAL: [X] Inpatient [ ] 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): Summit Medical Center
8c. CITY OR TOWN: Hermitage
8d. COUNTY OF DEATH: Davidson

9. MARITAL STATUS: [ ] Married [ ] Married, but separated [ ] Widowed [ ] Divorced [X] Never married [ ] Unknown
10. SURVIVING SPOUSE (If wife, give name prior to first marriage)
11a. DECEDENT'S USUAL OCCUPATION: Program Manager
11b. KIND OF BUSINESS/INDUSTRY: State of Tennessee

[redacted]
12a. RESIDENCE-STATE OR FOREIGN COUNTRY: Tennessee
12b. COUNTY: Davidson
12c. CITY OR TOWN: Nashville
12d. STREET AND NUMBER: 4529 Andrew Jackson Parkway
12e. INSIDE CITY LIMITS? [X] Yes [ ] No
12f. ZIP CODE: 37076
13. WAS DECEDENT EVER IN U.S. ARMED FORCES? [ ] Yes [X] No

Thompson, Fagan — NAME OF DECEDENT (For use by Physician or Institution)

14. 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)
[X] Bachelor's degree (e.g., BA, AB, BS)
[ ] 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

15. 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)
[X] White
[ ] Black or African American
[ ] American Indian or Alaska Native (Name of the enrolled or principal tribe) _____
[ ] Asian Indian
[ ] Chinese
[ ] Filipino
[ ] Japanese
[ ] Korean
[ ] Vietnamese
[ ] Other Asian (Specify)
[ ] Native Hawaiian
[ ] Guamanian or Chamorro
[ ] Samoan
[ ] Other Pacific Islander (Specify)
[ ] Other (Specify)
[ ] Unknown

18. FATHER'S NAME (First, Middle, Last): F. Fagan Thompson
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last): Mildred Yater

20a. INFORMANT'S NAME: Dan Syriac
20b. RELATIONSHIP TO DECEDENT: Partner
20c. MAILING ADDRESS (Street and Number, City, State, Zip Code): 4529 Andrew Jackson Pkwy., Hermitage, TN37076

21a. METHOD OF DISPOSITION: [ ] Burial [X] Cremation [ ] Donation [ ] Entombment [ ] Removal from State [ ] Other (Specify)
21b. PLACE OF DISPOSITION (Name of cemetery, crematory, other place): Maple City Cemetary Service
21c. LOCATION - City or Town and State: Nashville, Tennessee

22a. SIGNATURE OF FUNERAL DIRECTOR: ▶ J. Scott Keene
22b. LICENSE NUMBER: 5939
22c. SIGNATURE OF EMBALMER: ▶
22d. LICENSE NUMBER:
23a. NAME AND ADDRESS OF FUNERAL HOME: Tennessee FH & Cremation Services, 2700 Lauren Ave., Nashville, TN 37204
23b. LICENSE NUMBER OF FUNERAL HOME: 1232

24. REGISTRAR'S SIGNATURE: ▶ [signature]
25. DATE FILED (Month, Day, Year): January 11, 2012

26. CERTIFIER (Check only one)
26a. [ ] PHYSICIAN - To the best of my knowledge, death occurred at the date and place, and due to the cause(s) and manner stated.
26b. [X] 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: ▶ [signature]
27b. LICENSE NUMBER: 44517
27c. DATE SIGNED (Month, Day, Year): January 10, 2012
27d. NAME AND ADDRESS: Bridget B Eutsler, M.D.; 850 R.S. Gass Boulevard, Nashville, TN 37216; MEC12-0068

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. Complications of subdural hematoma	
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	b. Due to (or as a consequence of):	
	c. Due to (or as a consequence of):	
	d. Due to (or as a consequence of):	

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 [X] No

30. MANNER OF DEATH: [ ] Natural [ ] Homicide [X] Accident [ ] Pending Investigation [ ] Suicide [ ] Could not be determined
31. DID TOBACCO USE CONTRIBUTE TO DEATH? [ ] Yes [ ] Probably [ ] No [X] Unknown
32. 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): Unknown
34b. TIME OF INJURY: UNK
34c. INJURY AT WORK? [ ] Yes [X] No
34d. PLACE OF INJURY (e.g., home, farm, street, factory, office, building, etc.) (Specify): Residence
34e. DESCRIBE HOW INJURY OCCURRED: Multiple falls
34f. LOCATION OF INJURY (Street and Number, City or Town, State): 4529 Andrew Jackson Pkwy., Hermitage, TN

RDA-1389

VH-1050 (Rev. 8/2011)

5088118

I hereby certify the above to be a true and correct copy of the original document on file in this department. This certified copy is valid only when printed on security paper showing the red embossed seal of the Department of Health. Alteration or erasure voids this certification.

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

JAN 11 2012

Teresa S. Hendricks
STATE REGISTRAR

Tonya Y. Forsman
Tonya Y. Forsman, Local Registrar
Davidson County, Tennessee

Date Issued

CERTIFICATION OF VITAL RECORD

EFILED 10/22/20 02:58 erk

tnecu
TENNESSEE EMPLOYEES CREDIT UNION

October 15, 2020

Re: Estate of F. Fagan Thompson Jr.

Letter of Declination

To whom it may concern,

Employment Security Credit Union (ESCU) was named as executor for the estate of F. Fagan Thompson Jr. ESCU has since merged with Tennessee Employees Credit Union in 2017.

This letter is to decline interest as executor for the estate of F. Fagan Thomas Jr.

If you need additional information, please contact me directly.

Sincerely,

Tricia Cunningham

CEO

tricia@tnecu.org

EFILED 11/06/20 02:37 I rk

IN THE PROBATE COURT FOR DAVIDSON COUNTY, TENNESSEE AT NASHVILLE

IN THE MATTER OF:	)	
F. FAGAN THOMPSON	)	
	)	**Case No. 20P-1192**
DANIEL F. SYRIAC	)	
	)	
Petitioner	)	

ORDER ADMITTING WILL TO PROBATE

This cause came to be heard on the September 9, 2020 before the Honorable Randy Kennedy, Judge, Probate Court for Davidson County, Tennessee, pursuant to a Petition to Convert a Small Estate Affidavit filed by Petitioner, Daniel F. Syriac.

IT APPEARING that the Decedent, **F. FAGAN THOMPSON**, was a resident of Davidson County, Tennessee and died on January 9, 2012 at the age of 74,

IT FURTHER APPEARING that the instrument purporting to the be the Last Will and Testament of **F. FAGAN THOMPSON** was written during the lifetime of the Decedent, signed by the witnesses in the presence of each other.

IT FURTHER APPEARING that the original document is on file with the Clerk of this Court.

IT FURTHER APPEARING that witnesses to the Last Will and Testament of **F. FAGAN THOMPSON** signed Affidavits that at the time of the execution of the Will, the Decedent appeared to be of sound mind and disposing memory. Said Affidavits are on file with the Clerk of this Court.

IT FURTHER APPEARING IT FURTHER APPEARING that said Last Will and Testament nominates Eddie Chisholm to be the Executor of the Estate.

IT FURTHER APPEARING that the Last Will and Testament waives posting of a bond.

APPROVED FOR ENTRY:

s/ Paula Ogle Blair

PAULA OGLE BLAIR, #15862
Attorney for Daniel F. Syriac
211 Donelson Pike, Suite 214
Nashville, TN 37214
Telephone (615) 882-0190
Facsimile (615) 691-7869
Pblairlaw@comcast.net

CERTIFICATE OF SERVICE

I hereby certify that a true and exact copy of this Order was forwarded by regular and certified mail on 5th day of November 2020 to:

Randy Scoggin
4003 Pavilion Terrace Apt 1
Louisville, KY, 40299

Kathryn Scogin Harvey
66 Wood Place
Roswell, GA 30075

Jean Ann Scogin
66 Wood Place
Roswell, GA 30075

Robert Joseph Scogin, Jr.
13398 W. 68th Place
Arvada CO 80004

Edward Chisholm
522 Fairlane Drive
Nashville, TN 37211

s/ Paula Ogle Blair

PAULA OGLE BLAIR

EFILED 11/09/20 11:03 AM CASE NO. 20P1192 Richard R. Rooker, Clerk

FILED
NOV - 6 2020
RICHARD R. ROOKER, Clerk
By _____ Deputy

WILL

of

F. Fagan Thompson Jr.

I, Fagan Thompson of Davidson, Tennessee, declare this to be my Will and revoke all other Wills.

ARTICLE I

I authorize my Personal Representative to pay such sums as my Personal Representative deems proper for my cremation or burial and interment, including the disposition of the ashes or the acquisition of any burial site and the erection and engraving of monuments and markers, regardless of any limitation fixed by statute or rule of court and without order of court.

ARTICLE II

(A) My Personal Representative shall make the following distributions to the following institutions, and to the following persons who survive me:

Dan Lyons

(B) My Personal Representative shall distribute the rest of my tangible personal property not disposed of in Paragraph (A) of this Article II, or all of my tangible personal property if there are no specific bequests of tangible personal property, as a part of the rest of my estate.

ARTICLE III

I give the rest of my property to the following beneficiaries in the following proportions:

100% Dan Lyons

ARTICLE IV

The provisions in this Will for the distribution of my estate shall be supplemented by the following:

(A) My Personal Representative shall pay all taxes (including inheritance taxes) owed because of my death (including any interest and penalties) out of the residue of my estate. My Personal Representative shall create out of the residue a separate fund for the

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purpose of paying state inheritance taxes in the amount necessary to pay said inheritance taxes. The payment of the taxes shall be made regardless of whether the taxes are owed on property passing under this Will or outside of this Will and regardless of whether the taxes are owed by my estate or by any beneficiary. My Personal Representative shall not be entitled to reimbursement from any beneficiary for the payment of the taxes.

(B) Each beneficiary shall be deemed not to have survived me unless the beneficiary is living on the thirtieth day after the date of my death.

(C) Whenever any beneficiary of my estate is under a legal disability or, in the judgment of my Personal Representative, is for any reason unable to apply any distribution to the beneficiary's own best advantage, my Personal Representative may nevertheless make the distribution directly to the beneficiary or to the conservator of the beneficiary's property or to a person with whom the beneficiary resides at the time of the distribution in whatever manner my Personal Representative shall deem best. In the alternative and if the beneficiary is under twenty-one years of age, my Personal Representative may, in the discretion of my Personal Representative, distribute the property to a custodian for the beneficiary under a Uniform Transfer or Gift to Minors Act. The receipt by the beneficiary, conservator, custodian or other person of any distribution so made shall be a complete discharge to my Personal Representative regarding the distribution.

ARTICLE V

In addition to the existing authority of my Personal Representative, my Personal Representative may:

(A) Sell or grant options with respect to any real or personal property in such manner, for such purposes, for such prices, and upon such terms, credits and conditions as may be deemed advisable.

(B) Make any division or distribution of my residuary estate in money or in other property or partly in both upon the basis of fair market value and cause any share to be composed of money, property or undivided fractional share in property, different in kind from any other share.

(C) Permit any beneficiaries of my estate to use any tangible personal property or real property, without paying any rent, without giving any bond or security and without liability for any loss or damage. My Personal Representative shall not be liable or responsible for any injury to, consumption of or loss of any such property so used.

(D) Take charge of any real property as part of the probate administration of my estate for such period as my Personal Representative shall determine; collect any income therefrom; and pay the taxes and expenses thereof, including the cost of keeping such property in adequate condition and repair, in the manner and to the extent that my Personal Representative shall deem advisable.

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ARTICLE VI

(A) I appoint Tennessee Department of Labor and Workforce Development Credit Union, as Personal Representative of my estate. If such Personal Representative shall fail to qualify or cease to act as Personal Representative, I appoint the following persons or bank or trust company as alternate or successor Personal Representative to serve in the order specified below, and if the first alternate Personal Representative shall fail to qualify or cease to act as Personal Representative, the second alternate Personal Representative shall serve as Personal Representative.

Edward Chissom - First alternate
F. Fagan Thompson - Second alternate

To the extent permitted by law, my Personal Representative shall be authorized, in the discretion of my Personal Representative, to have my estate administered without adjudication, order or direction of the court having jurisdiction over my estate.

(B) No bond or surety shall be required of any Personal Representative serving hereunder.

(C) Throughout this Will the use of any gender shall be deemed to include all genders, and the use of the singular the plural, and vice versa. The terms "child" and "descendant" shall include an adopted person and such adopted person's descendants, if, but only if, the adopted person is not more than twelve years of age on the date of the court order granting such adoption.

(D) At the date of execution hereof, I have the following children who are now living: NONE.

I, the Testator, sign my name to this instrument this 23th day of December, 1999, and being first duly sworn, do hereby declare to the undersigned authority that I sign and execute this instrument as my will and that I sign it willingly, that I execute it as my free and voluntary act for the purposes expressed in the will, and that I am eighteen years of age or older, of sound mind, and under no constraint or undue influence.

F. Fagan Thompson

We, the witnesses, at the Testator's request, sign our names to this instrument, being first duly sworn, and do hereby declare to the undersigned authority that the Testator signs and executes this instrument as the Testator's will and that the Testator signs it willingly , and that each of us, in the presence and hearing of the Testator, hereby signs this will as witness to the Testator's signing, and that to the best of our knowledge

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Subscribed, sworn to and acknowledged before me by, F. Fagan Thompson, Jr., the Testator, and subscribed and sworn to before me by Edalie Chisholm, Barbara Demastus and Lisa Marchitto, witnesses, this 27th day of January, 2003

(Seal)

Nancy A. Hutson
(Signed)

Notary
(Official capacity of officer)

My Commission Expires APR. 2, 2005

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the Testator is eighteen years of age or older, of sound mind, and under no constraint or undue influence.

Eddie J. Chisholm of Nashville, Tennessee
Witness

Brenda K. Denastes of Nashville, Tennessee
Witness

Lisa M. Macchitto of Nashville, Tennessee
Witness

State of Tennessee

County Davidson

We, the Testator and the witnesses, respectively, whose names are signed to the attached or foregoing instrument, being first duly sworn, do hereby declare to the undersigned authority that the Testator signed and executed the instrument as the Testator's will and that the Testator had signed willingly , and that the Testator executed it as the Testator's free and voluntary act for the purposes expressed in the will, and that each of the witnesses, in the presence and hearing of the Testator, and at the request of the Testator, signed the will as witness and that to the best of the witnesses' knowledge the Testator was at that time eighteen years of age or older, of sound mind, and under no constraint or undue influence.

Eddie J. Chisholm
Witness

Brenda K. Denastes
Witness

Lisa M. Macchitto
Witness

STATE OF TENNESSEE

I, RICHARD R. ROOKER, Clerk of the Circuit Court for Davidson County, in the State aforesaid, do hereby certify that the foregoing is a true and correct copy of the LAST WILL AND TESTAMENT heretofore filed in the SEVENTH Circuit Court for Davidson County, Tennessee, on the 09 day of NOVEMBER, 2020, in Docket Number 20P1192, IN RE: THOMPSON JR., F. FAGAN, as same remains of record in the Minutes of said Court.

IN TESTIMONY WHEREOF, I hereunto subscribe my name and affix the seal of said Court, at office, in Nashville, the 17 day of NOVEMBER in the year 2020 and in the 244 year of American Independence.

RICHARD R. ROOKER, Clerk,

[SEAL]

By: _____

Deputy Clerk