THIS INSTRUMENT PREPARED BY: **Martin Heller Potempa & Sheppard** 1935 21st Avenue South, Ste 100 Nashville, Tennessee 37212 (615) 800-7096 Karen Johnson Davidson County Batch# 628290 **AFFIDAVITH** 05/04/2021 10:41:40 AM 7 pgs Fees: $37.00 Taxes: $0.00 20210504-0059559	STATE OF Tennessee COUNTY OF Davidson The actual consideration for this transfer is: $0.00 **BRUCE MICHAEL AMATO, AFFIANT** Subscribed and sworn to before me, this 19th day of April 2021. NOTARY PUBLIC My Commission Expires: 7/3/2023 JANA ORR STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON COUNTY My Commission Expires July 3, 2023

Address New Owner:	**Send Tax Bills To:**	**Tax Information:**
DARI ANNE AMATO 106 Oaklynn Dr., Madison, TN 37115	**NEW OWNER**	Parcel ID: 11912004200

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

AFFIDAVIT OF HEIRSHIP

1. My name is Bruce Michael Amato. I am an adult resident of Sumner County, Tennessee, I am competent to give the testimony in this sworn Affidavit, and my testimony herein is based upon my personal knowledge.

2. I am a family friend of Linda C. Tarbuk (the "Decedent") and the brother of Decedents son-in-law. I reside at 2009 Valley Drive, Goodlettsville, TN 37072. I have known the Decedent for thirty-five (35) years.

3. Decedent died intestate as a resident of Nashville, Davidson County, Tennessee on February 25, 2021. A copy of the Certificate of Death is attached hereto as **Exhibit 1**.

4. Decedent was unmarried and was survived by one (1) adult child, Dari Anne Amato.

5. At the time of her death, Decedent owned real property commonly known as **732 Cameo Drive, Nashville, TN 37210** and is more particularly described as:

> Land in Davidson County, Tennessee, being Lot No. 33 on the Plan of Battlewood Subdivision, Section 1, as of record in Book 1835, page 31, Register's Office for Davidson County, Tennessee.
>
> Being the same property conveyed to Linda C. Tarbuk from Daniel R. Cantrell. via Warranty Deed executed May 21, 1987, as of record in Book 7256, page 202, Register's Office for Davidson County

6. At the time of the Decedent's death, the real property described herein was titled solely in the name of Decedent.

7. To Affiant's knowledge, the Decedent owned no other real property and only minimal personal property in Tennessee. An estate has not been opened at this time; however, a Small Estate Affidavit shall be filed in the Seventh Circuit Court for Davidson County, Tennessee shortly hereafter.

8. Decedent was not enrolled in TennCare at any time during her life. A release of claims by TennCare is attached as **Exhibit 2.**

9. At the time of Decedent's death, said real property passed by operation of law and vested immediately in Decedent's sole heir-at-law, Dari Anne Amato, in fee simple absolute pursuant to Tenn. Code Ann 31-2-103 and remains so vested today.

FURTHER AFFIANT SAYETH NOT.

SWORN this 19th **day of** April **2021.**

BRUCE MICHAEL AMATO, AFFIANT

STATE OF Tennessee)
)
COUNTY OF Sumner)

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

Sworn and subscribed before me this 19th day of April 2021.

Antonio Jerome Brooks

NOTARY PUBLIC

My Commission Expires
July 2, 2024

My commission expires: _____

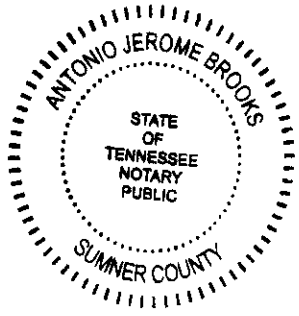


Exhibit 1

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2021 015201

1. Decedent's Legal Name			2. Sex	3. Date of Death
LINDA CHRISTINE TARBUK			FEMALE	02/25/2021
4. Time of Death (Approx.)	**5a. Age**	**6. Date of Birth**	**7. Birthplace**	
UNKNOWN	73	03/19/1947	MANLIUS, IL	
8a. Place of Death				
DECEDENT'S HOME				
8b. Facility Name		**8c. City or Town**	**8d. County of Death**	
732 CAMEO DRIVE		NASHVILLE	DAVIDSON	
9. Marital Status	**10. Surviving Spouse (name prior to first marriage)**	**11a. Decedent's Usual Occupation**	**11b. Kind of Business/Industry**	
DIVORCED		ADMINISTRATOR	ADMINISTRATION	
12. Social Security Number	**13a. Residence-State or Foreign Country**	**13b. County**	**13c. City or Town**	
8197	TENNESSEE	DAVIDSON	NASHVILLE	
13d. Street and Number		**13e. Inside City Limits?**	**13f. Zip Code**	**14. Was Decedent ever in US Armed Forces?**
732 CAMEO DRIVE		YES	37211	NO
15. Decedent's Education	**16. Decedent of Hispanic Origin?**		**17. Decedent's Race**	
HIGH SCHOOL GRADUATE OR GED COMPLETED	NO, NOT SPANISH/HISPANIC/LATINO		WHITE	
18. Father's Name		**19. Mother's Name Prior to First Marriage**		
CHARLES KONNECK		ANNA POFF		
20a. Informant's Name	**20b. Relationship to Decedent**	**20c. Mailing Address**		
DARI ANNE AMATO	DAUGHTER	106 OAKLYNN DRIVE, MADISON, TN 37115		
21a. Method of Disposition	**21b. Place of Disposition**	**21c. Location**		
CREMATION	NASHVILLE CREMATION SERVICE	NASHVILLE, TN		
22a. Signature of Funeral Director	**22b. License Number**	**22c. Signature of Embalmer**	**22d. License Number**	
▶ /s/ BRIAN S DAVIDSON	5814	▶		
23a. Name and Address of Funeral Home			**23b. License Number**	
BRENTWOOD-ROESCH-PATTON FUNERAL HOME, 9010 CHURCH ST EAST, BRENTWOOD, TN 37027-5255			911	
24. Registrar's Signature		**25. Date Filed**		
▶ /s/ EDWARD G BISHOP III		03/03/2021		

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.

27a. Certifier	**27b. License Number**	**27c. Date Signed**
▶ /s/ MICHAEL GERALD OLIVE	027011	03/03/2021

27d. Name and Address
MICHAEL GERALD OLIVE 1022 WEST GATE CIRCLE, BRENTWOOD, TN 37027

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. MYOCARDIAL INFARCTION	
	b. HYPERLIPIDEMIA	
	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? NO

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

30. Manner of Death	**31. Did Tobacco Use Contribute to Death?**	**32. If Female:**
NATURAL	YES	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**

PH-1659E RDA 10112

13456035

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 certificate. Reproduction of this document is prohibited.

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

1 3 4 5 6 0 3 5

Edward G. Bishop III
State Registrar

Lisa Piercey, MD, MBA, FAAP
Commissioner

Date Issued: Mar-03-2021

CERTIFICATION OF VITAL RECORD

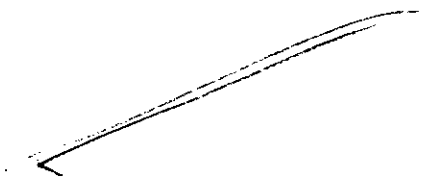


Exhibit 2



RFR PROCESSING UNIT
310 GREAT CIRCLE RD., 3W
NASHVILLE, TN 37243
Phone: (615) 741-0636, Fax (615) 413-1941
Email: RFR.TENNCARE@TN.GOV

April 16, 2021

Katie Aeschliman
1935 21st Ave. South, Ste. 100
Nashville, TN 37212

RE: Tarbuk, Linda Christine Date of Death: 2/25/2021 SSN: xxx-xx-8197
Our File Number: 29314

Katie Aeschliman:

The referenced decedent did not receive TennCare Long-Term Services and Supports. Therefore, the State of Tennessee hereby releases the TennCare claim against this estate pursuant to Tenn. Code Ann. § 71-5-116(c)(2). This release is not a waiver of the right of the State of Tennessee to pursue criminal or civil penalties if fraud or abuse is found to exist pursuant to Tenn. Code Ann. § 71-5-2601, et seq.

This document only releases TennCare's claim against the Decedent's probate estate. It does not release any trust, assets held in trust, or trustees. If you need a release or payoff for a trust, please send a copy of the Decedent's death certificate to estate.recovery@tn.gov.

Sincerely,

TennCare RFR Processing Unit