Karen Johnson Davidson County
Batch# 703716 AFFIDAVITH
08/24/2021 11:45:30 AM 5 pgs
Fees: $27.00 Taxes: $0.00
20210824-0114272

Commitment Number: 28959069

This instrument prepared by:
Jay A. Rosenberg, Esq., Member Tennessee Bar, Rosenberg PLLC, Attorneys At Law, 101 South Reid Street, Suite 307, Sioux Falls, South Dakota 57103 (513) 247-9605 Fax: (866) 611-0170.

AFFIDAVIT OF TRANSFER TO SURVIVOR/SURVIVORSHIP AFFIDAVIT

STATE OF Tennessee
COUNTY OF Davidson

Kelsey A. Tomasek ("Affiant"), being first duly cautioned and sworn, and having personal knowledge of the facts and being competent to testify as to these matters, deposes and says as follows:

1. Matthew F. Tubandt, A/K/A Matthew Ferrell Tubandt, formerly of Davidson County, Tennessee, died February 20, 2019, a legal resident of the State of Tennessee.
2. A certified copy of the Death Certificate for Matthew Ferrell Tubandt is attached to this Affidavit.
3. The decedent and this Affiant were the grantees in a certain deed recorded at 20180607-0054691, of the Deed Records of Davidson County, Tennessee (the "Deed"), with respect to the property legally described as follows:

SEE EXHIBIT A ATTACHED HERETO FOR THE LEGAL DESCRIPTION

4. In the Deed, the grantees designated are Kelsey A. Tomasek and Matthew F. Tubandt, wife and husband
5. The address of Affiant is 904 Debow St, Old Hickory, TN 37138-3109.

6. Affiant gives this Affidavit for the purpose of transferring the title to the foregoing property to Affiant on the records of the Recorder's Office in Davidson County, Tennessee.

Kelsey A. Tomasek

Kelsey A. Tomasek

Sworn to before me and subscribed in my presence by Kelsey A. Tomasek this 4th day of August, 20 21.

TIOMBE WALTON
STATE OF TENNESSEE NOTARY PUBLIC
MONTGOMERY COUNTY

Notary Public

my commission expires: 1/21/24

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2019 010038

DECEDENT (TYPE/PRINT IN PERMANENT BLACK INK)

1. DECEDENT'S LEGAL NAME: MATTHEW FERRELL TUBANDT
2. SEX: MALE
3. DATE OF DEATH: 02/20/2019
4. TIME OF DEATH (Approx): 04:45 PM
5a. AGE: 32
5b. UNDER 1 YEAR: Months / Days
5c. UNDER 1 DAY: Hours / Minutes
6. DATE OF BIRTH: 01/06/1987
7. BIRTHPLACE: BERWYN, IL
8a. PLACE OF DEATH: ER/OUTPATIENT
8b. FACILITY NAME: SOUTHERN HILLS MEDICAL CENTER
8c. CITY OR TOWN: NASHVILLE
8d. COUNTY OF DEATH: DAVIDSON
9. MARITAL STATUS: MARRIED
10. SURVIVING SPOUSE (name prior to first marriage): KELSEY TOMASEK
11a. DECEDENT'S USUAL OCCUPATION: MUSICIAN
11b. KIND OF BUSINESS/INDUSTRY: MUSIC INDUSTRY
12. SOCIAL SECURITY NUMBER: -0825
13a. RESIDENCE-STATE OR FOREIGN COUNTRY: TENNESSEE
13b. COUNTY: DAVIDSON
13c. CITY OR TOWN: OLD HICKORY
13d. STREET AND NUMBER: 904 DEBOW ST.
13e. INSIDE CITY LIMITS?: YES
13f. ZIP CODE: 37138
14. WAS DECEDENT EVER IN US ARMED FORCES?: NO
15. DECEDENT'S EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE
16. DECEDENT OF HISPANIC ORIGIN?: NO, NOT SPANISH/HISPANIC/LATINO
17. DECEDENT'S RACE: WHITE

PARENTS

18. FATHER'S NAME: SCOTT F TUBANDT
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE: LUCILLE MELLINGTON

20a. INFORMANT'S NAME: KELSEY TOMASEK
20b. RELATIONSHIP TO DECEDENT: WIFE
20c. MAILING ADDRESS: 904 DEBOW ST, OLD HICKORY, TN 37138

DISPOSITION

21a. METHOD OF DISPOSITION: CREMATION
21b. PLACE OF DISPOSITION: AFFILIATED CREMATORY
21c. LOCATION: NASHVILLE, TN
22a. SIGNATURE OF FUNERAL DIRECTOR: /s/ MATTHEW A. TERRY
22b. LICENSE NUMBER: 6054
22c. SIGNATURE OF EMBALMER: /s/ ADAM RODGERS
22d. LICENSE NUMBER: 4622
23a. NAME AND ADDRESS OF FUNERAL HOME: PHILLIPS-ROBINSON FUNERAL HOME, 2707 GALLATIN PIKE, NASHVILLE, TN 37216
23b. LICENSE NUMBER: 331

REGISTRAR

24. REGISTRAR'S SIGNATURE: /s/ EDWARD G. BISHOP III
25. DATE FILED: 02/26/2019

CERTIFIER

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: /s/ THOMAS DEERING, MD
27b. LICENSE NUMBER: 28369
27c. DATE SIGNED: 02/25/2019
27d. NAME AND ADDRESS: THOMAS DEERING, MD 850 R. S. GASS BLVD, NASHVILLE, TN 37216

MEDICAL CERTIFICATION

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	
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 A CONSEQUENCE OF)	
	c. DUE TO (OR A CONSEQUENCE OF)	
	d. DUE TO (OR A CONSEQUENCE OF)	

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

TH-1659 (Rev. 8/2017)

RDA 10112

11026943

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
Edward G. Bishop III
State Registrar

1 1 0 2 6 9 4 3

Date Issued: FEB 27 2019

CERTIFICATION OF VITAL RECORD

20210824011427 2

EXHIBIT A
(LEGAL DESCRIPTION)

Land in Davidson County, Tennessee, being Lot No. 38, on the Plan of Section "D", E. I. Du Pont de Nemours and Company's Subdivision, of record in Book 1424, Page 65, Register's Office for said County, to which plan reference is hereby made for a more complete description.

Tennessee Certification of Electronic Document

I, Talia Williford, do hereby make oath that I am a licensed attorney and/or the custodian of the original version of the electronic document tendered for registration herewith and that this electronic document is a true and exact copy of the original document executed and authenticated according to law on 8/4/21 (date of document).

Talia Williford
Affiant Signature

7/1/21
Date

State of Pennsylvania

County of Allegheny

Sworn to and subscribed before me this 1st day of July, 2021.

Notary's Signature

MY COMMISSION EXPIRES: 5/4/2022

NOTARY'S SEAL

Commonwealth of Pennsylvania - Notary Seal
Lissette Anne Moree, Notary Public
Beaver County
My commission expires May 4, 2022
Commission number 1223847
Member, Pennsylvania Association of Notaries