THIS INSTRUMENT PREPARED BY: **Martin Heller Potempa & Sheppard** 1935 21st Avenue South, Suite 100 Nashville, Tennessee 37212 (615) 800-7096 This affidavit was prepared based on the information provided by the parties and no independent title examination was prepared.	STATE OF TENNESSEE COUNTY OF DAVIDSON The actual consideration for this transfer is: $0.00 Brenda Manning BRENDA MANNING Subscribed and sworn to before me, this 20th day of December 2021. Donna M. Quarles NOTARY PUBLIC My Commission Expires: 3/8/2022

Address New Owner:	**Send Tax Bills To:**	**Tax Information & Parcel ID:**
Helen M. Smith 3253 Hummingbird Drive Nashville, TN 37318	New Owner	05913003500

Karen Johnson Davidson County
Batch# 795276 AFFIDAVITH
01/26/2022 08:17:31 AM 3 pgs
Fees: $17.00 Taxes: $0.00

20220126-0009229

STATE OF TENNESSEE)
) ss:
COUNTY OF DAVIDSON)

AFFIDAVIT OF HEIRSHIP

1. My name is Brenda Manning. I am an adult resident of the State of 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 the daughter of Samuel A. Smith, III, (hereinafter "Decedent") and Helen M. Smith.

3. Decedent died intestate as a resident of Davidson County, Tennessee on January 5, 2019, and was survived by his wife, Helen M. Smith, and nine (9) adult children: Judy D. Smith, Jeffery Smith, Tonya Jackson, Theresa Smith, Brenda Manning, Wanda Smith, Tyrone Smith, Tyson Smith, Monica Malone. A copy of the Decedent's Certificate of Death is attached hereto as **Exhibit 1**.

4. At the time of the Decedent's death, Decedent owned an interest in real

property commonly known as 3253 Hummingbird Drive (hereinafter "Real Property"), is more fully and particularly described as:

> LAND in Davidson County, Tennessee, being Lot No. 32 on the Plan of Treppard Heights, Section 7, of record in Book 2900, page 13, Register's Office for said County, as follows:
>
> BEGINNING at a point in the easterly margin of Pheasant Drive, the common corner of Lots 32 and 33; thence with the line between said lots, eastwardly 212 feet to a point; thence northwardly 204.7 feet to a point in the southerly margin of Hummingbird Drive; thence with the margin of the same westwardly 175.09 feet to a point, the beginning of a curve; thence around said curve with a radius of 25.15 feet, southwestwardly 39.35 feet to a point in the easterly margin of Pheasant Drive; thence with the margin of the same, southwardly 176.3 feet to the point of beginning.
>
> Being part of the real property conveyed to Samuel A Smith, III, & wife, Helen M Smith from Elsie M. Watkins, a single woman by warranty deed of record in Book 5059, page 453, Register's Office for Davidson County, Tennessee.

5. At the time of his death, Decedent was not a recipient of TennCare benefits.

6. Decedent's interest in the Real Property vested in Helen M. Smith immediately upon his death as the property was owned as tenants by the entirety. Upon the death of the Decedent, the Property vested in Helen M. Smith in fee simple absolute and remains so vested as of the execution of this affidavit.

FURTHER AFFIANT SAYETH NOT.

SWORN this 20th **day of** December **2021.**

Brenda Manning

BRENDA MANNING, Affiant

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

Now having first been sworn, the above-named BRENDA MANNING, 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 to and subscribed before me, the undersigned Notary Public, this 20th day of December 2021.

Donna M Quarles

NOTARY PUBLIC

My commission expires: 3/8/2022



STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2019 003056

[redacted]

1. DECEDENT'S LEGAL NAME: SAMUEL ALEXANDER SMITH III
2. SEX: MALE
3. DATE OF DEATH: 01/05/2019
4. TIME OF DEATH (Military): 22:50
5a. AGE: 79
5b. UNDER 1 YEAR – Months / Days
5c. UNDER 1 DAY – Hours / Minutes
6. DATE OF BIRTH: 03/23/1939
7. BIRTHPLACE: NASHVILLE, TN
8a. PLACE OF DEATH: INPATIENT
8b. FACILITY NAME: CENTENNIAL MEDICAL CENTER
8c. CITY OR TOWN: NASHVILLE
8d. COUNTY OF DEATH: DAVIDSON
9. MARITAL STATUS: MARRIED
10. SURVIVING SPOUSE (name prior to first marriage): HELEN M MAJORS
11a. DECEDENT'S USUAL OCCUPATION: TRUCK DRIVER
11b. KIND OF BUSINESS/INDUSTRY: YELLOW FREIGHT
12. SOCIAL SECURITY NUMBER: 6592
13a. RESIDENCE-STATE OR FOREIGN COUNTRY: TENNESSEE
13b. COUNTY: DAVIDSON
13c. CITY OR TOWN: NASHVILLE
13d. STREET AND NUMBER: 3253 HUMMINGBIRD DRIVE
13e. INSIDE CITY LIMITS?: YES
13f. ZIPCODE: 37218
14. WAS DECEDENT EVER IN US ARMED FORCES?: NO
15. DECEDENT'S EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED
16. DECEDENT OF HISPANIC ORIGIN?: NO, NOT SPANISH/HISPANIC/LATINO
17. DECEDENT'S RACE: BLACK OR AFRICAN AMERICAN
18. FATHER'S NAME: SAMUEL ALEXANDER SMITH II
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE: DIXIE JOHNIGAN
20a. INFORMANT'S NAME: HELEN SMITH
20b. RELATIONSHIP TO DECEDENT: WIFE
20c. MAILING ADDRESS: 3253 HUMMINGBIRD DRIVE, NASHVILLE, TN 37218
21a. METHOD OF DISPOSITION: CREMATION
21b. PLACE OF DISPOSITION: ELLIS CREMATORY
21c. LOCATION: NASHVILLE, TN
22a. SIGNATURE OF FUNERAL DIRECTOR: /s/ BYRETTIA LAWRENCE BROADY
22b. LICENSE NUMBER: 5130
22c. SIGNATURE OF EMBALMER: /s/ Terrell Andre Broady
22d. LICENSE NUMBER: 4117
23a. NAME AND ADDRESS OF FUNERAL HOME: TERRELL BROADY FUNERAL HOME, INC. 3855 CLARKSVILLE PIKE, NASHVILLE, TN 37218-2219
23b. LICENSE NUMBER: 4130
24. REGISTRAR'S SIGNATURE: /s/ EDWARD G. BISHOP III
25. DATE FILED: 01/23/2019

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CAUSE OF DEATH MUST COMPLETE AND SIGN WITHIN 48 HOURS.

26. CERTIFIER
26a. [x] 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/ JESUS G. BERDEJA
27b. LICENSE NUMBER: 043290
27c. DATE SIGNED: 01/22/2019
27d. NAME AND ADDRESS: JESUS G. BERDEJA 250 25TH AVENUE NORTH STE 412, NASHVILLE, TN 37203

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.

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

		Approximate Interval: Onset to Death
a.	ACUTE PROMYELOCYTIC LEUKEMIA	1 WEEK
	DUE TO (OR A CONSEQUENCE OF)	
b.		
	DUE TO (OR A CONSEQUENCE OF)	
c.		
	DUE TO (OR A CONSEQUENCE OF)	
d.		

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

28a. WAS AN AUTOPSY PERFORMED?: NO
28b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?

30. MANNER OF DEATH: NATURAL
31. DID TOBACCO USE CONTRIBUTE TO DEATH?: NO
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

PH-1659 (Rev. 8/2017) RDA 80112

10907168

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.

[redacted]

Edward G. Bishop III
State Registrar

1 0 3 0 7 4 5 8

Date Issued: JAN 23 2019

CERTIFICATION OF VITAL RECORD