Karen Johnson Davidson County
Batch# 853283 AFFIDAVITH
05/10/2022 04:00:26 PM 3 pgs
Fees: $17.00 Taxes: $0.00
20220510-0053534

STATE OF TENNESSEE)
) ss:
COUNTY OF DAVIDSON)

AFFIDAVIT OF HEIRSHIP PURSUANT TO T.C.A. § 30-2-712

COMES NOW Victoria L. Webb ("Affiant") who, first being duly sworn, and being of lawful age and a resident of Davidson County, Tennessee, and pursuant to Section 30-2-712 of the Tennessee Code Annotated, hereby swears to the following of her own free will and based upon her personal knowledge and familiarity:

1. **DECEDENT.** Decedent Lincoln Alfred Jones died intestate in Davidson County, Tennessee on June 25, 2021. *Death Certificate of Lincoln Alfred Jones is Attached.* The estate of the Decedent was not administered in a proceeding supervised by a court.

2. **DECEDENT'S SPOUSE.** The decedent died with no surviving spouse.

3. **DECEDENT'S HEIRS.** Decedent died with two surviving issue, Jacqueline L. Jones, an adult, who is the daughter of the decedent, whose address is 921 Clayton Avenue, Nashville, TN 37204 and Sheila Brent, an adult, who is the daughter of the decedent, whose address is 911 14th Avenue, Nashville, Tennessee 37208.

4. **DECEDENT'S REAL PROPERTY.** At the time of his death, the decedent owned property located at 921 Clayton Avenue, Nashville, TN 37204. The property located at 921 Clayton Avenue, Nashville, TN 37204 is more particularly described as follows:

> **A certain tract or parcel of land in Davidson County, Tennessee, being the west 80 feet of the east 116 (eel of the North 160 feet of Lot No. 38 on the map of the Subdivision of a pail of the Vale 14; Land, not of record, and more particularly described as follows:**
>
> **BEGINNNG at a point in the south margin of East Clayton Avenue, formerly Midway Avenue. being 240 feet west of Craig Avenue; thence southerly parallel to the west margin of Craig Avenue 190 feet to a point; thence westerly 80 feet to a point; thence northerly parallel to Craig Avenue 160 feet to the south margin of East Clayton Avenue: thence with the margin of the same easterly 80 feet to the point of beginning.**
>
> **Subject to easements, restrictions, and covenants of record, if any.**

Being the same property conveyed to Lena Jones and Husband, Lincoln Jones, by deed from Delores Knox, a single woman, and Robert Fitzgerald, Jr., a single man, of record in Instrument No. 20080304-0021415, said Register's Office.

Lena Jones died on July 10, 2017, at which time the property immediately vested in Lincoln Jones as the property was owned tenants by the entirety.

This is improved property known as 921 Clayton Avenue, Nashville, Tennessee 37204.

5. **VESTING OF PROPERTY CONFIRMED.** This affidavit will confirm the vesting of title to the real property located at 921 Clayton Avenue, Nashville, TN 37204, after the death of decedent Lincoln Alfred Jones, in Jacqueline L. Jones (50% ownership), Sheila Brent (50% ownership).

FURTHER AFFIANT SAYETH NOT.

Victoria L. Webb
Victoria L. Webb, *Affiant*

May 10, 2022
Date

NOTARY ACKNOWLEDGEMENT

Now having first been sworn, Victoria L. Webb, 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. The Affiant did not appear to be under any undue influence or duress and appeared to be competent to provide the information contained herein.

Notary Public

5/10/22
Date

My Commission Expires: 3/28/26

JAMES A. TOMPKINS
STATE OF TENNESSEE NOTARY PUBLIC
WILLIAMSON COUNTY

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

STATE FILE NUMBER: 2021 043627

1. Decedent's Legal Name: LINCOLN ALFRED JONES			2. Sex: MALE	3. Date of Death: 06/25/2021
4. Time of Death (Approx.): 23:20	5a. Age: 85	6. Date of Birth: 12/18/1935	7. Birthplace: COLUMBIA, TN	
8a. Place of Death: HOSPICE FACILITY				
8b. Facility Name: ALIVE HOSPICE		8c. City or Town: NASHVILLE		8d. County of Death: DAVIDSON
9. Marital Status: WIDOWED	10. Surviving Spouse (name prior to first marriage)	11a. Decedent's Usual Occupation: JANITORIAL SERVICES		11b. Kind of Business/Industry: METRO PUBLIC SCHOOL
12. Social Security Number: 9776	13a. Residence State or Foreign Country: TENNESSEE	13b. County: DAVIDSON		13c. City or Town: NASHVILLE
13d. Street and Number: 921 CLAYTON AVENUE		13e. Inside City Limits?: YES	13f. Zip Code: 37204	14. Was Decedent ever in US Armed Forces?: NO
15. Decedent's Education: 8TH GRADE OR LESS	16. Decedent of Hispanic Origin?: NO, NOT SPANISH/HISPANIC/LATINO		17. Decedent's Race: BLACK OR AFRICAN AMERICAN	
18. Father's Name: WILLIE THORTON JONES			19. Mother's Name Prior to First Marriage: ETTA MAI RANKINS	
20a. Informant's Name: JACQUELINE L JONES	20b. Relationship to Decedent: DAUGHTER	20c. Mailing Address: 921 CLAYTON AVENUE, NASHVILLE, TN 37204		
21a. Method of Disposition: BURIAL	21b. Place of Disposition: GREENWOOD CEMETERY		21c. Location: NASHVILLE, TN	
22a. Signature of Funeral Director: ▶ /e/ MELVIN J SMITH	22b. License Number: 4502	22c. Signature of Embalmer: ▶ /e/ Christopher Lee Jefferson		22d. License Number: 6500
23a. Name and Address of Funeral Home: SMITH FUNERAL DIRECTORS, 706 MONROE STREET, NASHVILLE, TN 37208-2618				23b. License Number: 809
24. Registrar's Signature: ▶ /e/ EDWARD G BISHOP III			25. Date Filed: 07/01/2021	

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: ▶ /e/ SASHA L. BOWERS	27b. License Number: 052952	27c. Date Signed: 06/30/2021

27d. Name and Address: SASHA L. BOWERS 1718 PATTERSON STREET, 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.

		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. LATE-ONSET DEMENTIA	
	b.	
	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: 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

RH-1659S

RDA 10112

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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

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Edward G. Bishop III
State Registrar

Lisa Piercey, MD, MBA, FAAP
Commissioner

Date Issued: Aug-03-2021

CERTIFICATION OF VITAL RECORD