This instrument was prepared by:
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Attorney at Law
6408 Clarksville Pike
P.O. Box 489
Joelton, Tennessee 37080-0489
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From paperwork provided by clients –
No Title examination requested.

NOTICE TO REGISTER:
Upon recording, please return
the recorded instrument to
Howard M. Skipworth
Attorney at Law
P. O. Box 489
Joelton, TN 37080

NEW OWNERS:

Janice M. Gibson
7827 Ridgewood Road
Goodlettsville, TN 37072

Map & Parcel No:
00900011200

SEND TAX NOTICE TO:

Janice M. Gibson
7827 Ridgewood Road
Goodlettsville, TN 37072

Karen Johnson Davidson County
Batch# 930541 **AFFIDAVITH**
10/17/2022 11:52:08 AM 4 pgs
Fees: $22.00 Taxes: $0.00
20221017-0113332

AFFIDAVIT OF HEIRSHIP

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

Comes the Affiant, Vallie Mae Edwards, being first duly sworn according to law, and being of lawful age and residing for the past 60 or more years in Davidson County, State of Tennessee, and pursuant to Section 30-2-712 of the Tennessee Code Annotated hereby swear to the following of her own free will and based upon her personal knowledge and familiarity:

1. I am a sibling of Carrie Belle Gibson A/K/A Carrie Gibson.

2. As evidenced by a Certificate of Death attached hereto as Exhibit "A", Carrie Belle Gibson died intestate on 04 August 2013.

3. The decedent died without a surviving spouse. The decedent was married once during her lifetime to Thomas Lurton Gibson, who died 16 March 1968.

4. The decedent died leaving one biological child: Janice M. Gibson. The decedent never gave birth or adopted any other child or children.

5. At the time of her death, the decedent owned improve property with her only issue/child, Janice M. Gibson, described as follows to wit:

SEE EXHIBIT "B"
ATTACHED HERETO
FOR COMPLETE DESCRITION
OF PROPERTY

Being the same property conveyed to Carrie Gibson and Janice M.Gibson, by Warranty Deed from Carl L. Frensley and wife, Martha Lewis Frensley, of record in Book 4424, Page 453, Register's Office for Davidson County, Tennessee, Carrie Gibson A/K/A Carrie Belle Gibson having since died on August 4, 2013.

6. This Affidavit will confirm the vesting of title to the improve real property located at 7827 Ridgewood Road, Goodlettsville, Davidson County, Tennessee 37072, after the death of Carrie Gibson, deceased, in Janice M Gibson, a single person, in fee simple.

T.C.A. § 67-4-409(a)(3)(D) exempts this instrument from tax and T.C.A. § 67-4-409(a)(5) further provides the valuation oath is unnecessary, the affidavit being used to evidence transfer of title to the property to the sole heir.

Further, Affiant saith not.

Dated this 20th day of September, 2022.

Vallie Mae Edwards

Vallie Mae Edwards, Affiant

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared Vallie Mae Edwards, the within named affiant, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that she executed the foregoing instrument for the purposes therein contained as her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal at my office in said County, on this 20th day of September, 2022.

Howard M. Whitworth

Notary Public

My commission expires: _____

HOWARD M. WHITWORTH
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
MY COMMISSION EXPIRES 10-2-2023

STATE OF TENNESSEE
Office of Vital Records

UNOFFICIAL DOCUMENT

13-050 51 — TENNESSEE DEPARTMENT OF HEALTH — CERTIFICATE OF DEATH — STATE FILE NUMBER

DECEDENT

1. DECEDENT'S LEGAL NAME (First, Middle, Last, Suffix)	2. SEX	3. DATE OF DEATH (Month, Day, Year)
Carrie Belle Gibson	Female	August 4, 2013

4. TIME OF DEATH (Approx.)	5a. AGE-Last Birthday (Years)	5b. UNDER 1 YEAR Months	Days	5c. UNDER 1 DAY Hours	Minutes	6. DATE OF BIRTH (Month, Day, Year)	7. BIRTHPLACE (City and State or Foreign Country)
05:10 AM	91					January 15, 1922	Goodlettsville, TN

TYPE/PRINT IN PERMANENT BACK INK

8a. PLACE OF DEATH (Check only one)

IF DEATH OCCURRED IN A HOSPITAL: ☐ 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)	8c. CITY OR TOWN	8d. COUNTY OF DEATH
7827 Ridgewood Road	Goodlettsville	Davidson

9. MARITAL STATUS	10. SURVIVING SPOUSE (If wife, give name prior to first marriage)	11a. DECEDENT'S USUAL OCCUPATION	11b. KIND OF BUSINESS/INDUSTRY
☐ Married ☐ Married, but separated ☒ Widowed ☐ Divorced ☐ Never married ☐ Unknown		Homemaker	

12. SOCIAL SECURITY NUMBER	13a. RESIDENCE-STATE OR FOREIGN COUNTRY	13b. COUNTY	13c. CITY OR TOWN
___-___-8930	TN	Davidson	Goodlettsville

13d. STREET AND NUMBER	13e. INSIDE CITY LIMITS	13f. ZIP CODE	14. WAS DECEDENT EVER IN US ARMED FORCES?
7827 Ridgewood Road	☒ Yes ☐ No	37072	☐ Yes ☒ No

NAME OF DECEDENT (For use by Physician or Institution)

3

15. 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
- ☐ Associates degree (e.g., AA, AS)
- ☐ 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

16. 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.)
- ☒ No, not Spanish/Hispanic/Latino
- ☐ Yes, Mexican, Mexican American, Chicano
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, other Spanish/Hispanic/Latino

(Specify) _____

☐ Unknown

20. DECEDENT'S RACE (Check one or more races to indicate what the decedent considered himself or herself to be)
- ☒ 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

PARENTS

18. FATHER'S NAME (First, Middle, Last)	19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last)
Hubert Krantz	Lena Utley

DISPOSITION

20a. INFORMANT'S NAME	20b. RELATIONSHIP TO DECEDENT	20c. MAILING ADDRESS (Street and Number, City, State, Zip Code)
Janice Gibson	Daughter	7827 Ridgewood Road, Goodlettsville, TN 37072

21a. METHOD OF DISPOSITION	21b. PLACE OF DISPOSITION (Name of cemetery, crematory, other place)	21c. Location - City or Town and State
☒ Burial ☐ Cremation ☐ Donation ☐ Entombment ☐ Removal from State ☐ Other (Specify) _____	Forest Grove Cemetery	Joelton, TN

22a. SIGNATURE OF FUNERAL DIRECTOR	22b. LICENSE NUMBER	22c. SIGNATURE OF EMBALMER	22d. LICENSE NUMBER
▶ John T Crockett	2645	▶ Jim Brewer	2969

23a. NAME AND ADDRESS OF FUNERAL HOME	23b. LICENSE NUMBER OF FUNERAL HOME
Anderson & Garrett Funeral Home P.O. Box 68, 3501 Old Clarksville Pike, Joelton, TN 37080	193

REGISTAR

24. REGISTRAR'S SIGNATURE	25. DATE FILED (Month, Day, Year)
▶ DeWelch Rhodes JR	August 14 2013

CERTIFIER

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

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. ☐ 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.

27a. SIGNATURE OF CERTIFIER	27b. LICENSE NUMBER	27c. DATE SIGNED (Month, Day, Year)
▶ J. Bryant M.D.	MD 156 33	August 9, 2013

27d. NAME AND ADDRESS James D. Bryant, M.D., Heritage Medical
222 22nd Ave.N., Suite 100, Nashville, TN 37203

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. DO NOT ABBREVIATE. Enter only one cause on each line.

		Approximate interval: Onset to death
IMMEDIATE CAUSE (Final disease or condition resulting in death) → a.	DEMENTIA	one year
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.

Type 2 diabetes mellitus; high blood pressure

29a. WAS AN AUTOPSY PERFORMED? ☐ Yes ☒ No

29b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? ☐ Yes ☐ No

30. MANNER OF DEATH	31. DID TOBACCO USE CONTRIBUTE TO DEATH?	32. IF FEMALE:
☒ Natural ☐ Homicide ☐ Accident ☐ Pending Investigation ☐ Suicide ☐ Could not be determined	☐ Yes ☐ Probably ☒ No ☐ Unknown	☐ 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:	34a. DATE OF INJURY (Month, Day, Year)	34b. TIME OF INJURY	34c. INJURY AT WORK?	34d. PLACE OF INJURY - at home, farm, street, factory, office, building, etc. (Specify)
☐ Driver/Operator ☐ Passenger ☐ Pedestrian ☐ Other (Specify) _____			☐ Yes ☐ No	

34e. DESCRIBE HOW INJURY OCCURRED

34f. LOCATION OF INJURY (Street and Number, City or Town, State)

RDA 1399

PH-1659 (Rev. 9/2011)

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6157015

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

6157015

Catherine D. Haralson, RN, BA
STATE REGISTRAR

John J. Dreyzehner, MD, MPH, FACOEM
COMMISSIONER

CERTIFICATION OF VITAL RECORD

EXHIBIT "B"

LAND in the 14th, formerly the 24th , Civil District of Davidson County, Tennessee, described as follows:

BEGINNING in the center of Ridgewood Road, formerly Cotton Patch Road, at a point 250.30 feet southeasterly from the southeasterly corner of the property conveyed to William T. Williams, Jr., and wife, by deed from L. F. Durocher, Jr., and wife, of record in Book 2535, Page 621, Register's Office for said County; thence south 37° east 25.2 feet; thence south 14° east 184.8 feet; thence south 66° 30′ west, 1,003.7 feet; thence north 3° east 210 feet; thence north 67° 33′ east, 926.3 feet to the beginning and containing 4.36 acres, according to a copy of a survey made by John J. O'Connor.