This Instrument Prepared By:
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Karen Johnson Davidson County
Batch# 968229 AFFIDAVITH
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Fees: $27.00 Taxes: $0.00
20230207-0008670

AFFIDAVIT OF INHERITANCE (REAL ESTATE)

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Comes the affiant, Sherry D. Hooten, being first duly sworn according to law, being of lawful age and a resident of the State of Tennessee, pursuant to Tenn. Code Ann. § 30-2-712, hereby swears to the following of her own free will and based upon her personal knowledge and familiarity:

1. George E. Hooten (the "decedent owner"), a resident of Davidson County, Tennessee, who died on October 28, 2022, held a one-third (1/3) tenants in common, with rights of survivorship, interest in the following described real estate, parcel identification number 171 02 0A 130.00:

> Land in Davidson County, Tennessee, being Unit No. 130 on the Plan of Phase 3B, Brentwood Villa, of record in Plate Book 6900, Page 4, as amended in Plat Book 6900, Page 329, Register's Office for said County, to which plat reference is hereby made for a more complete and accurate legal description.
>
> Being the same property conveyed to George E. Hooten and Sherry D. Hooten, husband and wife, and Alexandra Diane Hull, an unmarried woman, all as joint tenants with right of survivorship by deed from Heather L. Nunn, an unmarried woman, of record as Instrument No. 20181026-0106237, Register's Office for Davidson County, Tennessee.
>
> This is improved property known as 239 Glenstone Circle, Brentwood, TN 37027.

2. The Last Will and Testament of George E. Hooten, was duly admitted to probate on February 2, 2023 in the Seventh Circuit Court, Probate Division, for Davidson County, Tennessee, as Case No. 23P-84. The Last Will and Testament named Sherry D. Hooten as the

Executrix. Sherry D. Hooten was duly qualified and appointed by said Court in a muniment of title probate only. All debts of the decedent were paid.

3. I am the surviving spouse of George E. Hooten. I am also the executrix appoint under the Will of George E. Hooten and the Trustee of the George E. Hooten Living Trust dated December 6, 2007, the sole legatee and devisee under the Will.

4. By operation of law, the interest in the above described real property owned by George E. Hooten passed to Sherry D. Hooten and Alexandra Diane Hull as the surviving grantees under the deed dated October 17, 2018, of record as Instrument Number 20181026-0106237.

5. This affidavit will confirm the vesting of all right, title and interest in the real property described above, after the death of George E. Hooten to Sherry D. Hooten and Alexandra Diane Hill as joint tenants with right of survivorship.

Further, affiant saith not.

Dated this the 6th day of February, 2023.

Sherry D. Hooten

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Personally appeared before me, Sherry D. Hooten, the affiant, to me known to be the person described herein and who executed the foregoing instrument, and acknowledged that she executed the same as her free act and deed, on this the 6th day of February, 2023.

Notary Public

LISA D. HILL
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
My Commission Expires 05-05-2025

My Commission expires: 5/5/2025

EXHIBIT A

Death Certificate of George E. Hooten

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

STATE FILE NUMBER 2022 074446

1. Decedent's Legal Name			2. Sex	3. Date of Death
GEORGE EDWARD HOOTEN			MALE	10/28/2022
4. Time of Death (24hrs)	5a. Age	6. Date of Birth	7. Birthplace	
06:00 AM	80	12/28/1941	NASHVILLE, TN	
8a. Place of Death				
DECEDENT'S HOME				
8b. Facility Name		8c. City or Town		8d. County of Death
822 OLD HICKORY BLVD		BRENTWOOD		DAVIDSON
9. Marital Status	10. Surviving Spouse (name prior to first marriage)	11a. Decedent's Usual Occupation		11b. Kind of Business/Industry
MARRIED	SHERRY VANDERPOOL	PHARMACIST		PHARMACY
12. Social Security Number	13a. Residence-State or Foreign Country	13b. County		13c. City or Town
[redacted]	TENNESSEE	DAVIDSON		BRENTWOOD
13d. Street and Number		13e. Inside City Limits?	13f. Zip Code	14. Was Decedent ever in US Armed Forces?
822 OLD HICKORY BLVD		YES	37027	NO
15. Decedent's Education	16. Decedent of Hispanic Origin?		17. Decedent's Race	
DOCTORATE OR PROFESSIONAL DEGREE	NO, NOT SPANISH/HISPANIC/LATINO		WHITE	
18. Father's Name		19. Mother's Name Prior to First Marriage		
GEORGE BAKER HOOTEN		JOHNNIE STEWART		
20a. Informant's Name	20b. Relationship to Decedent	20c. Mailing Address		
SHERRY CREATON	SPOUSE	822 OLD HICKORY BLVD, BRENTWOOD, TN 37027		
21a. Method of Disposition	21b. Place of Disposition	21c. Location		
BURIAL	MOUNT OLIVET CEMETERY	NASHVILLE, TN		
22a. Signature of Funeral Director	22b. License Number	22c. Signature of Embalmer		22d. License Number
▶ /e/ KALEIGH B EASTWOOD	20503	▶ /e/ KELSEY LEANN POWERS		6665
23a. Name and Address of Funeral Home				23b. License Number
MOUNT OLIVET FUNERAL HOME AND CEMETERY, 1101 LEBANON PIKE, NASHVILLE, TN 37210-3001				970
24. Registrar's Signature		25. Date Filed		
▶ /e/ EDWARD G BISHOP III		11/15/2022		

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
▶ /e/ MICHAEL CHARLES TOPF	61177	11/14/2022

27d. Name and Address: MICHAEL CHARLES TOPF 1215 21ST AVE. S, FL 6-10, NASHVILLE, TN 37232

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. CARDIOPULMONARY FAILURE	
	b. RESPIRATORY FAILURE	
	c.	
	d.	

Part II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I: HEAD AND NECK CANCER

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	NO	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-1659E RDA 10112

14549682

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

1 4 5 4 9 6 8 2

Edward G. Bishop III
State Registrar

Morgan McDonald, MD, FAAP, FACP
Commissioner

Date Issued: Nov-15-2022

CERTIFICATION OF VITAL RECORD

CERTIFICATE OF AUTHENTICITY

I, Anna E. Vasquez, 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 February 6, 2023.

02/06/23
Date

Anna E. Vasquez

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Sworn to and subscribed before me this 6th day of February 2023.

Notary Public

My Commission Expires: _____

Notary's Seal (if on paper)

