THIS INSTRUMENT PREPARED BY: **Martin Heller Potempa & Sheppard** 2122 21st Avenue South Nashville, Tennessee 37212 (615) 800-7096 Karen Johnson Davidson County Batch# 1020533 **AFFIDAVITH** 06/29/2023 08.39 16 AM 5 pgs Fees $27 00 Taxes $0 00 20230629-0049515	STATE OF TENNESSEE COUNTY OF DAVIDSON The actual consideration for this transfer is: $0.00 AFFIANT JOSHUA JONES Subscribed and sworn to before me, this 20 day of JUNE 2023. NOTARY PUBLIC My Commission Expires: 01-04-27 JESSICA ANN CLEGG STATE OF TENNESSEE NOTARY PUBLIC COUNTY OF DAVIDSON MY COMM EXPIRES JANUARY 4, 2027

Address New Owner:	Send Tax Bills To:	Tax Information:
JASON JOHNSON & JUSTIN JOHNSON 7135 Donald Wilson Drive Fairview, TN 37062	NEW OWNER	Parcel ID: 142-07-0C-017.00CO

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

AFFIDAVIT OF HEIRSHIP

1. My name is Joshua Jones 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 first cousin once removed of Catherine Tanner (the "Decedent"). I reside Pegram, TN. I have known Decedent for my entire life.

3. Decedent died intestate as a resident of Nashville, Davidson County, Tennessee on June 1, 2023. A copy of the Certificate of Death is attached hereto as **Exhibit 1**.

4. Decedent was unmarried and was survived by two (2) adult children, Jason Johnson and Justin Johnson.

5. At the time of her death, Decedent owned real property commonly known as **404 Bradford Green, Unit 17, Nashville, TN 37221** and is more particularly described as:

> Land in Davidson County, Tennessee, being Unit No. 17 on the Plan of Ashley Green, a Horizontal Property Regime, as shown on Exhibit "C" of the Master Deed establishing a Horizontal Property Regime of Ashley Green, a Condominium Development established pursuant to the provisions of The Tennessee Horizontal Property Regime Act as the same is set out in Tennessee Code Annotated Section 66-27-101, et seg., of record in Book 7184, page 44, corrected in Book 7467, page 279, amended in Book 7482, page 312 and Instrument No. 20111101-0084880, Register's Office for Davidson County, Tennessee, to which reference is hereby made for a more complete and accurate legal description, The easements, restrictive covenants, conditions and regulations imposed upon and relating to the units, property, co-owners and tenants of Ashley Green, a Horizontal Property Regime contained in said Master Deed and By-Laws appended thereto as Exhibit "B", and plat appended thereto as Exhibit "C", are incorporated herein by reference and made a part hereof the same as though copied herein, together with the undivided percentage interest in the Common Elements appurtenant to said unit as for forth in said Master Deed.
>
> Being the same property conveyed to James .L Mathews, unmarried by Warranty Deed from Carol Ann Jones, unmarried, dated November 10, 2015 and recorded November 12, 2015 of record in Instrument No. 20151112-0115000, Register's Office for Davidson County, Tennessee.

6. At the time of the Decedent's death, the real property described herein was titled solely in the name of Decedent.

7. To Affiant's knowledge, the Decedent owned no other property, real or personal, in Tennessee. An estate has not been opened, nor will one be opened.

8. Decedent was not enrolled in TennCare at any time during her life.

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9. At the time of Decedent's death, said real property passed by operation of law and vested immediately in Decedent's heirs-at-law pursuant to Tenn. Code Ann 31-2-103 and remains so vested today. Based upon the foregoing, the property is currently vested as follows:

Jason Johnson	1/2
Justin Johnson	1/2

FURTHER AFFIANT SAYETH NOT.

SWORN this 20 **day of** June **2023.**

JOSHUA JONES, AFFIANT

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

Now having first been sworn, the above-named **Joshua Jones**, Affiant, appeared before me and proved his identity to me by a government issued photograph identification card, and gave the testimony in this Affidavit for the purpose(s) stated herein.

Sworn and subscribed before me this 20 day of June 2023.

NOTARY PUBLIC

My commission expires: 01-04-27

JESSICA ANN CLEGG
STATE OF TENNESSEE NOTARY PUBLIC
COUNTY OF DAVIDSON
MY COMM. EXPIRES JANUARY 4, 2027

Exhibit 1

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2023 035542

1 Decedent's Legal Name			2. Sex	3 Date of Death
CATHERINE GAIL TANNER			FEMALE	06/01/2023 -FOUND
4 Time of Death (Approx.)	**5a Age**	**6 Date of Birth**	**7 Birthplace**	
UNKNOWN	66	08/27/1956	LINDEN TN	
8a Place of Death				
DECEDENT'S HOME				
8b Facility Name		**8c City or Town**		**8d County of Death**
404 BRADFORD GREEN		NASHVILLE		DAVIDSON
9 Marital Status	**10 Surviving Spouse (name prior to first marriage)**	**11a. Decedent's Usual Occupation**		**11b. Kind of Business/Industry**
DIVORCED		HOMEMAKER		DOMESTIC
12. Social Security Number	**13a Residence-State or Foreign Country**	**13b County**		**13c City or Town**
...-0593	TENNESSEE	DAVIDSON		NASHVILLE
13d Street and Number	**13e Inside City Limits?**	**13f Zip Code**		**14 Was Decedent ever in US Armed Forces?**
404 BRADFORD GREEN	YES	37221		NO
15 Decedent's Education	**16 Decedent of Hispanic Origin?**	**17 Decedent's Race**		
HIGH SCHOOL GRADUATE OR GED COMPLETED	NO, NOT SPANISH/HISPANIC/LATINO	WHITE		
18 Father's Name		**19 Mother's Name Prior to First Marriage**		
MARLIN FRED TANNER		VEMA RUTH WILLIAMS		
20a Informant's Name	**20b Relationship to Decedent**	**20c Mailing Address**		
JASON JOHNSON	SON	7135 DONALD WILSON DRIVE FAIRVIEW, TN 37062		
21a Method of Disposition	**21b Place of Disposition**	**21c Location**		
BURIAL	BEECH GROVE CEMETERY	PLEASANTVILLE, TN		
22a Signature of Funeral Director	**22b License Number**	**22c Signature of Embalmer**		**22d License Number**
▶ /e/ GRACE ANNE DEAL	20481	▶ /e/ ERIC HUGHES		5124
23a Name and Address of Funeral Home				**23b License Number**
HARPETH HILLS MEMORY GARDENS, FUNERAL HOME AND CREMATION CENTER, 9090 HIGHWAY 100, NASHVILLE, TN 37221-				849
24 Registrar's Signature		**25 Date Filed**		
▶ /e/ EDWARD G BISHOP III		06/13/2023		

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/ ELSIA YOO	3986	06/02/2023

27d Name and Address

ELSIA YOO 7640 HIGHWAY 70 SOUTH, STE 110 NASHVILLE, TN 37221

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 LIKELY CARDIAC ARREST	MINUTES
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 HYPERLIPIDEMIA	5 YEARS
	c	
	d	

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

RHEUMATOID ARTHRITIS, DEPRESSION, HYPOTHYROIDISM, IRON DEFICIENCY ANEMIA, ANXIETY OSTEOPOROSIS

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	NOT PREGNANT WITHIN PAST YEAR

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

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
State Registrar

Ralph Alvarado, MD, FACP
Commissioner

Date Issued Jun-14-2023

CERTIFICATION OF VITAL RECORD