AFFIDAVIT OF INHERITANCE (REAL ESTATE)

ADDRESS OF NEW OWNER AS FOLLOWS	SEND TAX BILLS TO	MAP & PARCEL NO
Matthew Alan McDonald Paige Elise McDonald 7839 Rainey Drive Antioch, TN 37013	same	182-6-A-18

THIS INSTRUMENT WAS PREPARED BY

Elizabeth L Adams, Attorney
7100 Hardwood Lane
College Grove, TN 37046
Phone 615-293-5598
Email eadams@adamslaw-tn com

Karen Johnson Davidson County
Batch# 1024693 AFFIDAVITH
07/11/2023 09 12:48 AM 8 pgs
Fees $42 00 Taxes $0 00
20230711-0052853

The undersigned, being duly sworn, depose and say:

BARRY L. MCDONALD, a resident of Antioch, Davidson County, State of Tennessee, who died September 8, 2022, as evidenced by a copy of the death certificate attached as Exhibit A, held a 100% interest in the following described real estate located in Davidson County, Tennessee, bound and described as follows, to wit:

> LAND in Davidson County, Tennessee, being all of Lot No. 18, on the Plan of Final Plat, Section One, Old Hickory Hills, as shown by plat appearing of record in Instrument No. 20011023-0115382, of the Register's Office of Davidson County, Tennessee, to which plat reference is hereby made for more complete details of said lot.

THE PREVIOUS AND LAST conveyance by deed to BARRY L. MCDONALD, by Quitclaim Deed from DONNA L. MCDONALD by A Final Decree of Divorce in the Circuit Court for Williamson County, Tennessee, Docket Number 12K043, of record in Instrument No.: 20041026-0127898, Register's Office for Davidson County, Tennessee.

BARRY L. MCDONALD died intestate, unmarried, and was survived by one son, MATTHEW ALAN MCDONALD, and one daughter, PAIGE ELISE MCDONALD, who each received a Fifty Percent (50%) interest in his estate as heirs at law. Order for Intestate Administration, Seventh Circuit Court of Davidson County, Tennessee (Probate Division) 22 P 2147 is attached as Exhibit B. BARRY L. MCDONALD is also known as BARRY LAMONT MCDONALD.

TennCare Release is attached as Exhibit C.

This the 23 day of May, 2023.

MATTHEW ALAN MCDONALD, Affiant
7839 Rainey Drive
Antioch, TN 37013

STATE OF TENNESSEE)
COUNTY OF Williamson)

Subscribed and sworn to before me came MATTHEW ALAN MCDONALD who executed this Affidavit of Inheritance (Real Estate) on this the 23 day of May, 2023.

My Commission Expires: 08/08/26.

Notary Public

BRYANT J. MILLER
STATE OF TENNESSEE NOTARY PUBLIC
WILLIAMSON COUNTY

Exp 08/08/26

This the 23 day of May, 2023.

PAIGE ELISE MCDONALD, Affiant

STATE OF TENNESSEE)
COUNTY OF Dickson)

Subscribed and sworn to before me came PAIGE ELISE MCDONALD who executed this Affidavit of Inheritance (Real Estate) on this the 23 day of June, 2023.

My Commission Expires: 10-20-2026.

Notary Public

ASHLEY PATE
STATE OF TENNESSEE NOTARY PUBLIC
COUNTY OF DICKSON

STATE OF TENNESSEE
Office of Vital Records

[redacted]

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2022 059851

1 Decedent's Legal Name			2 Sex	3. Date of Death
BARRY LAMONT MCDONALD			MALE	09/08/2022
4 Time of Death (Approx.)	**5a Age**	**6 Date of Birth**	**7 Birthplace**	
12 13 AM	71	07/01/1951	MCMINNVILLE, TN	
8a Place of Death				
DECEDENT'S HOME				
8b Facility Name		**8c City or Town**	**8d County of Death**	
7839 RAINEY DR		ANTIOCH	DAVIDSON	
9 Marital Status	**10 Surviving Spouse (name prior to first marriage)**	**11a Decedent's Usual Occupation**	**11b Kind of Business/Industry**	
DIVORCED		MANUFACTURING	BRIDGESTONE	
12 Social Security Number	**13a Residence-State or Foreign Country**	**13b County**	**13c City or Town**	
[redacted]	TENNESSEE	DAVIDSON	ANTIOCH	
13d Street and Number	**13e Inside City Limits?**	**13f Zip Code**	**14 Was Decedent ever in US Armed Forces?**	
7839 RAINEY DR	YES	37013	NO	
15 Decedent's Education	**16 Decedent of Hispanic Origin?**	**17 Decedent's Race**		
SOME COLLEGE CREDIT, BUT NO DEGREE	NO, NOT SPANISH/HISPANIC/LATINO	WHITE		
18. Father's Name		**19 Mother's Name Prior to First Marriage**		
LA MONT MCDONALD		LUICILLE TURNER		
20a Informant's Name	**20b Relationship to Decedent**	**20c Mailing Address**		
MATTHEW MCDONALD	SON	7839 RAINEY DR, ANTIOCH, TN 37013		
21a Method of Disposition	**21b Place of Disposition**	**21c Location**		
CREMATION	NASHVILLE CREMATION SERVICE	NASHVILLE TN		
22a Signature of Funeral Director	**22b License Number**	**22c. Signature of Embalmer**	**22d License Number**	
▶ /e/ BRIAN S DAVIDSON	5814	▶		
23a Name and Address of Funeral Home			**23b License Number**	
WOODLAWN ROESCH-PATTON FUNERAL HOME AND MEMORIAL, 660 THOMPSON LANE, NASHVILLE, TN 37204-0407			933	
24 Registrar's Signature		**25 Date Filed**		
▶ /e/ EDWARD G BISHOP III		09/13/2022		

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/ EMILY DENNISON, M D	53219	09/12/2022

27d Name and Address
EMILY DENNISON M D, 850 R S GASS BLVD, NASHVILLE, TN 37216

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 Last on line a Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST	a PENDING	
	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?

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
PENDING INVESTIGATION		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

14368993

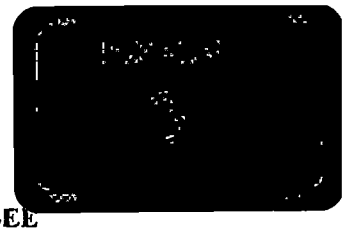
I hereby certify the above to be a true and correct representation of the record or document on file in this department. This certified copy is valid only when printed on security paper showing the red embossed seal of the Tennessee Department of Health. Alteration or erasure voids this certification. 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

1 4 3 6 8 9 9 3
Date Issued : Sep-13-2022

CERTIFICATION OF VITAL RECORD



IN THE SEVENTH CIRCUIT COURT OF DAVIDSON COUNTY, TENNESSEE
(Probate Division)

IN THE MATTER OF:	)	
	)	
The Estate of Barry Lamont McDonald, Deceased	)	**NO.: 22 P 2147**
	)	
	)	
Matthew Alan McDonald, Petitioner	)	
	)	

ORDER FOR INTESTATE ADMINISTRATION

Based on an examination of the Petition, a hearing was held on December 14, 2022, and the Court finds the following:

A. Decedent was a resident of Davidson County, Tennessee;

B. Decedent died on September 8, 2022, at the age of seventy-one (71);

C. Decedent left no will,

D Petitioner is the son of the decedent and is the person entitled to serve because the other person with a right to serve have waived her right in favor of Petitioner;

E. Decedent owned property at decedent's death which is subject to a Court-supervised administration by this Court; and

F. Each person who is an heir at law of the estate is an adult and each has consented to the Administrator being excused from bond, filing an inventory, and filing interim accountings as evidenced by each heir's signed, acknowledged Consent to Serve and Agreement to Waive Bond, Inventory and Interim Accountings.

Based on these findings, the Court orders the following.

1. The oath be accepted and letters of administration will be issued to Matthew Alan McDonald,

2. All bonds are excused;

3. Notice be given to creditors pursuant to T.C.A. § 30-2-306(f),

4. The requirement of inventory is waived;

5 The requirement of interim accounting is waived;

6 The Administrator shall file the affidavit certifying the sending of a copy of the Letters of Administration to each heir at law within sixty (60) days of the date of this Order.

7 Notice will be given the Department of Health, Bureau of TennCare, as required by T C.A § 71-5-116(c);

8 An estate status report shall be filed fifteen (15) months from the date of this Order and then annually until closed.

APPROVED FOR ENTRY:

[ELECTRONIC SIGNATURE PAGE TO FOLLOW]

HONORABLE JUDGE ANDRA HEDRICK

Elizabeth L Adams (BPR #024287)
The Adams Law Firm, PC
Attorney for Petitioner
7100 Hardwood Lane
College Grove, Tennessee 37046
Phone: (615) 293-5598
Fax: (615) 791-6096
Email cadams@adamslaw-tn com

CERTIFICATE OF SERVICE

This is to certify that I have served a copy of the within ORDER FOR INTESTATE ADMINISTRATION on the interested parties and heirs at law of decedent by mailing the same to her last known address by U S Postal Service with sufficient postage thereon, as follows:

Matthew Alan McDonald
7839 Rainey Drive
Antioch, TN 37013

Paige Elise McDonald
100 Black Oak Drive
Dickson, TN 37055

This the 14th day of December, 2022.

Elizabeth L. Adams

Elizabeth L Adams (BPR #024287)
The Adams Law Firm, P.C.
Attorney for Petitioner
7100 Hardwood Lane
College Grove, TN 37046
Phone: (615) 293-5598
Email: eadams@adamslaw-tn.com

Case Title: MCDONALD V MCDONALD

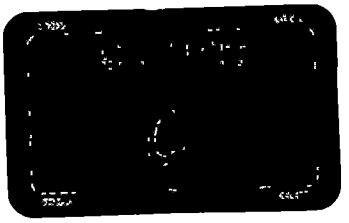
Case Number: 22P2147

Type: APPOINTING ORDER - ESTATES

The foregoing is hereby ORDERED, ADJUDGED AND DECREED:

Judge Andra Hedrick, Seventh Circuit

TN Division of TennCare



RFR PROCESSING UNIT
310 GREAT CIRCLE RD , 3W
NASHVILLE, TN 37243
Phone (615) 741-0636, Fax (615) 413-1941
Email RFR TENNCARE@TN GOV
#

October 31, 2022

Elizabeth L Adams
7100 Hardwood Lane
College Grove, TN 37046

RE McDonald, Barry Lamont Date of Death 9/8/2022 SSN xxx-xx-1934
Our File Number. 81820

Elizabeth L Adams

The referenced decedent did not receive TennCare Long-Term Services and Supports Therefore, the State of Tennessee hereby releases the TennCare claim against this estate pursuant to Tenn Code Ann § 71-5-116(c)(2). This release is not a waiver of the right of the State of Tennessee to pursue criminal or civil penalties if fraud or abuse is found to exist pursuant to Tenn Code Ann § 71-5-2601, et seq

This document is only relevant to TennCare's claim against the Decedent's probate estate. It does not apply to any Special Needs Trusts, Pooled Special Needs Trust, Qualified Income Trusts, or any other type of trust that contains a Medicaid payback provision. If you need a payoff for this type of trust, you must contact TennCare at 844-629-0941, 2 at prompt, or via email at estate.recovery@tn.gov. Please provide the Decedent's death certificate and copy of the trust when making such a request.

Sincerely,

Joan Jackson

TennCare RFR Processing Unit