THIS INSTRUMENT PREPARED BY:
FREEMAN & BRACEY, PLC
P. O. Box 527
885 Conference Drive, Suite 500
Goodlettsville, Tennessee 37070-0527

Karen Johnson Davidson County
Batch# 1049335 AFFIDAVITH
09/13/2023 10:39:30 AM 5 pgs
Fees: $27.00 Taxes: $0.00
20230913-0071767

AFFIDAVIT OF HEIRSHIP

The undersigned, Affiant, **JEFFREY NORMAN HAYNES**, a resident of Davidson County, being first duly sworn and according to law, being of lawful age and pursuant to Section 30-2-712 of the Tennessee Code Annotated, hereby deposes and swears to the following on her own free will and based upon personal knowledge and familiarity:

1. The said **TERRY JAY NORMAN** (the "Decedent") died intestate on August 28, 2023.

2. The said **TERRY JAY NORMAN** at the time of his death, was an unmarried and of majority age.

3. The Decedent had one (1) natural child born to him during his lifetime: namely, **JONATHON EDWARD NORMAN,** living and of majority age at the time of decedents death, and the Decedent had no other children born to or adopted by him during his lifetime.

4. This Affidavit is being provided to clarify title to all real property **TERRY JAY NORMAN** may have had interest in after the time of his death, including but not exclusive to the property commonly known as: **1012 2nd Avenue South, Nashville, Davidson County Tennessee 37210** Map/Parcel ID: 093-15-0-320.00; said Register's Office for Davidson County.

6. That this Affidavit of Heirship is being prepared for the purposes established in Tenn. Code Ann. 30-2-712, and the Affiant acknowledges that his execution of the same is subject

to and governed by the penalties set forth in Section (f) of the same statute, and that this Affidavit is not made for any fraudulent purpose.

7. That the Affiant acknowledges that this Affidavit of Heirship may be relied upon by third parties in order to establish chain of title by descent and distribution.

Further, Affiant saith not.

[Signature page to follow and the remainder of this page is intentionally left blank]

JEFFREY NORMAN HAYNES
Affiant

SUBSCRIBED AND SWORN TO before me this 8 day of September, 2023.

Notary Public

My Commission Expires: 11-16-25

[SEAL]

KRISTEN ELDER
STATE OF TENNESSEE NOTARY PUBLIC
WILLIAMSON COUNTY
My Commission Expires 11-16-2025

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Personally appeared before me, Kristen Elder, a Notary Public in and for said County and State, JEFFREY NORMAN HAYNES, the within named individual, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged that she executed the within instrument for the purposes therein contained.

Witness my hand and official seal at Williamson County, Tennessee, this the 8th day of September, 2023.

NOTARY PUBLIC

My Commission Expires: 11-16-25
[SEAL]

KRISTEN ELDER
STATE OF TENNESSEE NOTARY PUBLIC
WILLIAMSON COUNTY
My Commission Expires 11-16-2025

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

#

September 12, 2023

Russell E. Freeman
885 Conference Dr., #500
Goodlettsville, TN 37072

RE: Norman, Terry J. Date of Death: 8/28/2023 SSN: xxx-xx-4998
Our File Number: 107883

Russell E. Freeman:

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

CERTIFICATE OF AUTHENTICITY

I, **Devin Freeman Park**, 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 **9/11/2023** [DATE].

AFFIANT SIGNATURE

9/11/2023
DATE

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Sworn to and subscribed before me on this the **11th** day of **September**, 2023.

Notary Signature
My Commission Expires: 4/26/25
[SEAL]

