Karen Johnson
Batch # 1133469
05/10/2024 02:06:41 PM
Fees: $12.00 Taxes: $0.00
Davidson County
AFFIDAVITH
2 pgs
20240510-0034638

This instrument was prepared by:
Donna Trainer [name]
17735 Gulf Blvd 203 [street or postal address]
Redington Shores FL 33708 [city, state, zip code]

GRANTEE(S): Donna Trainer [names]

SEND TAX NOTICES TO: Donna Trainer 17735 Gulf Blvd #203 Redington Shores, FL. 33708 [postal address, city, state, zip code]

MAP PARCEL NUMBER: 148 09 0 069 00

AFFIDAVIT OF HEIRSHIP

Tennessee Code Annotated § 30-2-712.

STATE OF TENNESSEE
COUNTY OF Davidson

The undersigned, being duly sworn, deposes and says:

1. My full name is Donna R. Trainer. I will refer to myself in this Affidavit as the Affiant.

2. I reside at 17735 Gulf Blvd #203 Redington Shores FL 33708 [*street address, city, state, zip code*]

3. I have personal knowledge of the matters stated in this Affidavit.

4. On Dec 24th 2023 [*date of death*], Emma Warden Lebeck Clary [*full name of decedent*] died at NHC Place Cool Springs [*place of death*]. I will refer to this person as the Decedent.

5. The real property to which this Affidavit applies is located at 250 Haywood Lane Nashville, Tn. 37211 [*address*] in _____ County, Tennessee, more fully described as: [*complete legal description*] _____

For prior title, see Book 3915 [*number*], Page 127 [*number*] in the Register's Office of Davidson County, Tennessee.

6. At the time of the Decedent's death, the Decedent resided at 250 Haywood Lane Nashville Tn. 37211 [*street address, city, state, zip code*]

7. The estate of the Decedent ..... [*select one*]
☒ Was not administered in a proceeding supervised by a court.
☐ Was administered in a proceeding supervised by a court in _____ [*county and state*] in the _____ [*court*] in case no. _____.

T.a.l.

8. Facts concerning my relationship to the Decedent are: I am the only child and named as sole heir & executor following the death of both parents.
9. Additional facts pertinent to determine who is legally entitled to the estate of the Decedent at the time of the Decedent's death are: _____

_____

Affiant

Sworn to and subscribed before me this 10 day of May, 2024

My Commission expires: 1/4/2027

Notary Public

CHRIS K LEFEVER
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY