# AFFIDAVIT OF HEIRSHIP PURSUANT TO T.C.A. §30-2-712

Karen Johnson
Batch # 1237915
02/18/2025 08 36 18 AM
Fees $17 00 Taxes $0 00
Davidson County
AFFIDAVITH
3 pgs
20250218-0011586

**Prepared by:**
Frank J. Steiner, Attorney
2200 21st Avenue South, Suite 309
Nashville, Tennessee 37212
(615) 730-6090

Map & Parcel 63-8 Par 7 Ts
Send Tax Bills to: William Perry McGowan; 3515 Broadway Drive, Nashville, Tennessee 37207

**STATE OF TENNESSEE**

**COUNTY OF DAVIDSON**

Comes the affiant, William Perry McGowan, being first duly sworn according to law, and being of lawful age and a resident of Nashville, Davidson County, State of Tennessee, and pursuant to *Section 30-2-712 of the Tennessee Code Annotated*, hereby swears to the following of his own free will and based upon his personal knowledge and familiarity:

1. I am William Perry McGowan, hereinafter referred to as "Affiant." I reside at 3515 Broadway Drive, Nashville, Tennessee 37207. I am familiar with the family history of the deceased, Charles McGowan.

2. Charles McGowan, (the "decedent") died November 21, 2024.

3. The decedent died without a surviving spouse. The decedent was married once during his lifetime to Elenor R. McGowan who predeceased Decedent. Decedent was survived by a son, William Perry McGowan, affiant.

4. Decedent, Charles McGowan, the party recorded on the property deed, died intestate leaving his sole legal living heir as William Perry McGowan.

5. At the time of his death, the decedent owned real property located at 420 Hadley Bends Blvd. Old Hickory, 37138, and being more particularly described to wit:

Being Lots 19 and 20, Block "U" in the Subdivision known as Hadley Bend City, a Plan of which is of record in Book 421, Page 120, Registrar's Office for Davidson County, Tennessee. SAID Lots 19 and 20 each front 25 feet on the north side of Hadley Band Boulevard and run back 150 feet to the line of John Donelson property.

BEING the same property converted to Willa D. Miller by deed from Razzie Lee Woodward, Lewis C. Woodward, Harold Eugene Woodard, Jacqueline Yvonne Woodard, Lester Nathaniel Woodard, Angela Christine Woodard and Lee Anthony Woodard by deed of record in Book 6994, Page 572, Registrar's Office for Davidson County, Tennessee.

6. This ***affidavit*** will confirm the vesting of title to the real property located at 420 Hadley Bends Blvd. Old Hickory, 37138 to William Perry McGowan, sole heir.

Further, affiant saith not.

Dated this Third day of February, 2025.

William Perry McGowan

NIDA STEINER
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY

Subscribed and sworn to before me this 3rd day of February, 2025.

My commission expires: 01/24/2028

STATE OF TENNESSEE

CERTIFICATION OF VITAL RECORD

TENNESSEE DEPARTMENT OF HEALTH

# CERTIFICATE OF DEATH

STATE FILE NUMBER 2024 072133

| 1 Decedent's Legal Name | | | 2 Sex | 3 Date of Death |
|---|---|---|---|---|
| CHARLES SAMUEL MCGOWAN | | | MALE | 11/21/2024 |
| **4 Time of Death (Approx.)** | **5a Age** | **6 Date of Birth** | **7 Birthplace** | |
| 01 12 | 85 | 07/19/1939 | NASHVILLE, TN | |
| **8a Place of Death** | | | | |
| HOSPICE FACILITY | | | | |
| **8b Facility Name** | | **8c City or Town** | **8d County of Death** | |
| THE RESIDENCE/ALIVE HOSPICE | | NASHVILLE | DAVIDSON | |
| **9 Marital Status** | **10 Surviving Spouse (name prior to first marriage)** | **11a Decedent's Usual Occupation** | **11b Kind of Business/Industry** | |
| WIDOWED | | WATER SERVICE | METRO WATER | |
| **12 Social Security Number** | **13a Residence-State or Foreign Country** | **13b County** | **13c City or Town** | |
| | TENNESSEE | DAVIDSON | OLD HICKORY | |
| **13d Street and Number** | **13e Inside City Limits?** | **13f Zip Code** | **14 Was Decedent ever in US Armed Forces?** | |
| 420 HADLEYS BEND BLVD | YES | 37138 | YES | |
| **15 Decedent's Education** | **16 Decedent of Hispanic Origin?** | **17 Decedent's Race** | | |
| 9TH - 12TH GRADE NO DIPLOMA | NO, NOT SPANISH/HISPANIC/LATINO | BLACK OR AFRICAN AMERICAN | | |
| **18 Father's Name** | | **19 Mother's Name Prior to First Marriage** | | |
| SAMUEL MCGOWAN | | ELIZABETH BATTLE | | |
| **20a Informant's Name** | **20b Relationship to Decedent** | **20c Mailing Address** | | |
| WILLIAM PERRY MCGOWAN | SON | 3515 BROOKWAY DR, NASHVILLE, TN 37207 | | |
| **21a Method of Disposition** | **21b Place of Disposition** | **21c Location** | | |
| CREMATION | ELLIS FUNERAL HOME & CREMATION SERVICES | NASHVILLE, TN | | |
| **22a Signature of Funeral Director** | **22b License Number** | **22c Signature of Embalmer** | **22d License Number** | |
| ▶ /e/ EDWARD C HATCH | 4300 | ▶ /e/ HERMAN BRYANT TAYLOR | 20087 | |
| **23a Name and Address of Funeral Home** | | | **23b License Number** | |
| GARDNER MEMORIAL CHAPEL, INC , 2302 BUCHANAN ST, NASHVILLE, TN 37208-1914 | | | 1036 | |
| **24 Registrar's Signature** | | **25 Date Filed** | | |
| ▶ /e/ EDWARD G BISHOP III | | 11/26/2024 | | |

**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/ MARY-ELLEN EDMISTON | 5916 | 11/25/2024 |

**27d Name and Address**

MARY-ELLEN EDMISTON 1718 PATTERSON STREET, NASHVILLE TN 37203

**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) Seque dially ing 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 CHRONIC OBSTRUCTIVE PULMONARY DISEASE | UNKNOWN |
| | 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?** 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 | YES | 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

I certify that this is a true and correct representation of the original certificate on file with the Tennessee Office of Vital Records This copy is not valid unless prepared on security paper displaying the state seal and signature of the State Registrar

Edward G Bishop III
State Registrar

Ralph Alvarado, MD, FACP
Commissioner

Date Issued Nov-26-2024

0 1 6 7 3 0 5 2 5

THE GREAT SEAL OF THE STATE OF TENNESSEE XVI AGRICULTURE COMMERCE 1796

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE