This Instrument Prepared By/
Return After Recording To

Martina McClain
3913 Bradley Court
Antioch, TN 37013
(615)

Karen Johnson
Batch # 1272908
05/14/2025 09 36.01 AM
Fees $42 00 Taxes $0 00
Davidson County
AFFIDAVITH
8 pgs
20250514-0037857

AFFIDAVIT OF HEIRSHIP REGARDING PHILLIP WAYNE McCLERKIN

STATE OF TENNESSEE)
)
COUNTY OF Davidson)

On **this** 24th **day of** April **2025**, personally appeared **LINDA McCLERKIN REAMES** (the "Affiant") being duly sworn according to law, and being of lawful age, who pursuant to T.C.A. Section 30-2-712 hereby certifies and swears to the following of her own free will and based upon her own personal knowledge and belief.

1. The Affiant is at least eighteen (18) years of age and is a resident of Davidson County, State of Tennessee for 39 years, having an address of 245 Delvin Drive, Antioch, TN 37013.

2. The Affiant was personally acquainted with **PHILLIP WAYNE McCLERKIN** (the "Decedent"), who died on June 2, 2022 at the age of 52 years, and was acquainted with him for 52 years by reason of:

   The Affiant was the Decedent's aunt.

3. The Decedent's home address at the time of his death was 4933 Pebble Creek Drive, Antioch, TN 37013, and on the date of death the Decedent was domiciled and was a resident of Davidson County, Tennessee.

4. At the time of his death, the Decedent was unmarried

5. The Decedent died testate and at the time of his death he had the following natural or lawfully adopted children all of which were living at the time of his death, none of which were minors:

   a. **QUINTON McCLERKIN** (not a minor); and
   b. **SHANTERRIN STRAIGHTHORN** (not a minor).

6. Other than the persons named in Paragraph 5, the Decedent had no other children whether living or deceased at the time of his death.

7. At the time of his death, the Decedent owned the following parcel of real property which is located in Davidson County, Tennessee (hereinafter referred to as the "Property")·

Address / Description	**Property Location**
4933 Pebble Creek Dr Antioch, TN 37013 (Decedent held a 100 0% interest at death)	Davidson County, Tennessee

8. The legal description and other further identifying information for the Property is attached hereto as **SCHEDULE A**

9 This affidavit is executed and intended for the express purpose of being an Affidavit of Heirship pursuant to **T.C.A. §30-2-712** and recorded for the purpose of confirming the vesting of title to real property following the owner's death, which property is located in Davidson County, Tennessee

10. The Decedent's Last Will and Testament which was executed in Nashville, Tennessee on **March 8, 2021** according to law and is attested by **PHILEMON AUSTIN** and **YAMMONE JORDAN**, bequeaths the Property to·

MARTINA L. McCLAIN

11. The Decedent's said Last Will and Testament and a copy of his Death Certificate has been recorded concurrently with this Affidavit

12 The Affiant acknowledges that her execution of this affidavit is subject to and governed by the penalties set forth in T.C A §30-2-712 (f), and that this Affidavit is not made for any fraudulent purpose.

13 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

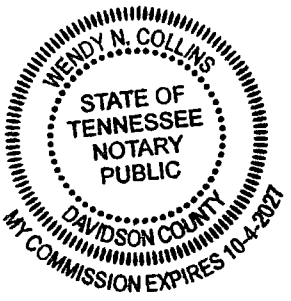
FURTHER AFFIANT SAITH NOT

Linda M. Reames

//s// LINDA McCLERKIN REAMES

The above was sworn to and subscribed to before me **this** 24th **day of** April, **2025**, by **LINDA McCLERKIN REAMES**, Affiant, to me known (or proved to me on the basis of satisfactory evidence) to be the person described in and who executed the foregoing instrument for the purposes therein contained, and acknowledged the execution of the same as a free act and deed, and who, after being duly sworn, acknowledged upon oath that the matters contained herein are true and correct to the best of Affiant's knowledge, information and belief

[stamp]



NOTARY PUBLIC

My commission expires 10/04/2027

SCHEDULE A

Legal Description

Lot No. 44 on the Plan of Pebble Creek Subdivision, Section One, of record in Plat Book 5210, Page 72, Register's Office for Davidson County, Tennessee, to which Plan reference is hereby made for a more complete and accurate legal description.

This being the same property conveyed to Phillip Wayne McClerkin from Condell P. Segovia and wife, Sharon S. Segovia, via Warranty Deed dated November 23, 2011 and recorded as Instrument No. 20111128-0092031 Register's Office for Davidson County, Tennessee.

Property Address: 4933 Pebble Creek Drive, Antioch, TN 37013

Map/Parcel: 149 06 0 002.00 (Davidson County, Tennessee)

Last Will and Testament

I, Phillip Wayne McClerkin, resident in the City of Antioch, County of Davidson, State of Tennessee being of sound mind, not acting under duress or undue influence, and fully understanding the nature and extent of all my property and of this disposition thereof, do hereby make, publish, and declare this document to be my Last Will and Testament ("Will"), and hereby revoke any and all other wills and codicils heretofore made by me.

I. EXPENSES & TAXES

I direct that my Personal Representative, hereinafter named, pay all my debts, and expenses of my last illness, funeral, and burial, as soon after my death as may be reasonably convenient, and I hereby authorize my Personal Representative to settle and discharge, in his or her absolute discretion, any claims made against my estate.
I further direct that my Personal Representative shall pay out of my estate any and all estate and inheritance taxes payable by reason of my death in respect of all items included in the computation of such taxes, whether passing under this Will or otherwise. Said taxes shall be paid by my Personal Representative as if such taxes were my debts without recovery of any part of such tax payments from anyone who receives any item included in such computation.

II. DISPOSITION OF PROPERTY

I hereby give, devise, and bequeath all of my property, both real and personal and wherever situated to Martina McClain(Cousin)

If the event that my beneficiary has predeceased me, I give, devise, and bequeath all of my property, both real and personal and where situated to Wanda McClerkin (Aunt)

III. PERSONAL REPRESENTATIVE

I hereby nominate, constitute, and appoint Martina McClain(Cousin) , of Antioch, TN, County of Davidson, State of Tennessee as my personal representative of my estate Martina McClain and I request that she be appointed temporary Personal Representative if she applies. If for any reason my Personal Representative is unable to act, then I nominate, constitute, and appoint Wanda McClerkin (Aunt) of Antioch, TN, County of Davidson, State of Tennessee to serve instead and under the same terms and conditions. In addition to all other powers and without diminution, I hereby invest by Personal Representative will all fiduciary powers contained in TENNESSEE CODE ANNOTATED 35-50-110, all of which provisions and powers are incorporated herein by reference as fully as if copied in whole, as such statute may be subsequently amended.

IV. OMISSION

Except to the extent that I have included them in this Will, I have intentionally, and not as a result of any mistake or inadvertence, omitted in this Will to provide for any family members and/or issue of mine, if any, however defined by law, presently living or hereafter born or adopted.

V. BOND

No bond shall be required of any Personal Representative or fiduciary serving hereunder, whether or not specifically named in this Will, or if a bond is required by law, then no surety will be required on such bond.

VI. MISCELLANEOUS

Whenever the context permits, the term "Personal Representative" shall include "Executor" and "Administrator," the use of a particular gender shall include any other gender, and references to the singular or the plural shall be interchangeable. All references to the Internal Revenue Code shall mean the Internal Revenue Code of 1986 or any successor Code. All references to estate taxes shall include inheritance and other death taxes.

VII. ASSIGNMENT

The interest of any beneficiary in this Will, shall not be alienable, assignable, attachable, transferable nor paid by way of anticipation, nor in compliance with any order, assignment or covenant and shall not be applied to, or held liable for, any of their debts or obligations either in law or equity and shall not in any event pass to his, her, or their assignee under any instrument or under any insolvency or bankruptcy law, and shall not be subject to the interference or control of creditors, spouses or others.

VIII. GOVERNING LAW

This document shall be governed by the laws in the State of Tennessee.

IX. BINDING ARRANGEMENT

Any decision by my Personal Representative with respect to any discretionary power hereunder shall be final and binding on all persons interested. Unless due to my Personal Representative's own willful default or gross negligence, no Personal Representative shall be liable for said Personal Representative's acts or omissions or those of any prior Personal Representative.

I, the undersigned Phillip Wayne McClerkin, do hereby declare that I sign and execute this instrument as my last Will, that I sign it willingly in the presence of each of the undersigned witnesses, and that I execute it as my free and voluntary act for the purposes herein expressed, on this 8 day of March, 2021.

Testator Signature

Phillip W. McClerkin
Testator (Printed Name)

The foregoing instrument, was on this 8th day of March, 2021, subscribed on each page and at the end thereof by Phillip McClerkin, the above-named Testator, and by him signed, sealed, published and declared to be his LAST WILL AND TESTAMENT, in the presence of us and each of us, who thereupon, at his request, in his presence, and in the presence of each other, have hereunto subscribed our names as attesting witnesses thereto.

Witness Signature

894 Cheyenne Blvd Nashville, TN 37115
Address

Yammore D. Jordan
Witness Signature

1201 Atkins Ridge Dr. La Vergne, TN 37086
Address

TESTAMENTARY AFFIDAVIT

STATE OF Tennessee

COUNTY OF Davidson, SS.

Before me, the undersigned authority, on this day personally appeared Phillip McClerkin, testator, Phulemon Austin, witness and Yammore Jordan, witness, known to me to be the testator and the witnesses, respectively, whose names are signed to the attached or foregoing instrument, and, all of these persons being by me duly sworn, the testator declared to me and to the witnesses in my presence that the instrument is the testator's last will and that the testator has willingly signed or directed another to sign for him, and that the testator executed it as the testator's free and voluntary act for the purposes therein expressed; and each of the witnesses stated to me, in the presence of the testator, that they signed the will as witnesses and that to the best of their knowledge the testator was eighteen (18) years of age or over, of sound mind and under no constraint or undue influence.

Testator Signature

Witness Signature

Yammore D. Jordan
Witness Signature

Subscribed and sworn to before me by the said testator and the said witnesses, this 8th day of March, 2021

Notary Public

My Commission expires:
7/9/22

CARRIE PARMAN
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
MY COMMISSION EXPIRES 7-9-2022

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2022 038315

1 Decedent's Legal Name			2 Sex	3 Date of Death
PHILLIP WAYNE MCCLERKIN			MALE	06/02/2022
4 Time of Death (Approx.)	5a Age	6 Date of Birth	7 Birthplace	
05 27 AM	52	01/26/1970	HUNTINGDON, TN	
8a Place of Death				
OTHER RESIDENCE				
8b Facility Name		8c City or Town		8d County of Death
345 HARRISON STREET B3		PARIS		HENRY
9 Marital Status	10 Surviving Spouse (name prior to first marriage)	11a Decedent's Usual Occupation		11b Kind of Business/Industry
WIDOWED		FORK LIFT DRIVER		CEVA LOGISTICS
12 Social Security Number	13a Residence-State or Foreign Country	13b County		13c City or Town
	TENNESSEE	DAVIDSON		ANTIOCH
13d Street and Number		13e Inside City Limits?	13f Zip Code	14 Was Decedent ever in US Armed Forces?
4933 PEBBLE CREEK ROAD		YES	37103	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	BLACK OR AFRICAN AMERICAN		
18 Father's Name		19 Mother's Name Prior to First Marriage		
GEORGE ALBERT NESBY		ANNA MCCLERKIN		
20a Informant's Name	20b Relationship to Decedent	20c Mailing Address		
MARTINA LASHARA MCCLAIN	COUSIN	3913 BRADLEY COURT, ANTIOCH TN 37013		
21a Method of Disposition	21b Place of Disposition	21c Location		
BURIAL	ST PAUL CEMETERY	HUNTINGDON, TN		
22a Signature of Funeral Director	22b License Number	22c Signature of Embalmer	22d License Number	
▶ /e/ STEVEN PAUL CARTER	4318	▶ /e/ STEVEN PAUL CARTER	5239	
23a Name and Address of Funeral Home			23b License Number	
DILDAY-CARTER FUNERAL HOME, INC , 650 HIGH ST, HUNTINGDON, TN 38344			777	
24 Registrar's Signature		25 Date Filed		
▶ /e/ EDWARD G BISHOP III		06/08/2022		

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/ SCOTT PORTIS MD	7989	06/08/2022

27d Name and Address: SCOTT PORTIS MD 235 KECK LANE, BUCHANAN TN 38222

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 listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST

a [redacted]

b [redacted]

c

d

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

ALCOHOLISM

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	UNKNOWN	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

13670014

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

1 3 6 7 0 0 1 4

Edward G Bishop III
State Registrar

Date Issued: Jul-29-2022

CERTIFICATION OF VITAL RECORD