Karen Johnson
Batch # 1321735
09/15/2025 10:33:22 AM
Fees: $17.00 Taxes: $0.00
Davidson County
AFFIDAVITH
3 pgs
20250915-0073288

Address New Owner:
Melinda Griffith, et. al.
29405 Rock Creek Dr.
Southfield, MI 48076

Parcel ID: **17301015900**

AFFIDAVIT OF HEIRSHIP

1. My name is **Vicki Ketreece Yokley** ("Affiant"). I currently reside in Davidson County, state of Tennessee. I am an adult, and I am competent to give the testimony in this sworn Affidavit. My testimony herein is based upon my personal knowledge.

2. Daniel Lee Haug (hereinafter "Decedent") was my friend and I knew him for approximately eight (8) years.

3. Decedent died on October 28, 2024, as a resident of Davidson County, Tennessee. His Death Certificate is attached hereto as **Exhibit 1**. To my knowledge, he died without a Last Will and Testament, and his intestate estate is being administered under Docket No. 24P2496 in the Seventh Circuit Court for Davidson County, Tennessee.

4. At the time of his passing, Decedent owned real property located at **209/211 CEDARVIEW DRIVE, ANTIOCH, TN 37013** (the "Property"). The Property is more fully and particularly described as follows:

> BEING Lot No. 40 on the Plan of Section II-B, Monte Carlo, as shown by plat of record in Plat Book 5050, page 99, of the Register's Office of Davidson County, Tennessee, to which plat reference is hereby made for a more complete and accurate description of said lot.
>
> Being the same property conveyed to Daniel L. Haug, unmarried, by Warranty Deed from Don R. Henderson and wife, Jackie A. Henderson, of record in Book 11614, Page 707, Register's Office for Davidson County, Tennessee.

5. The Decedent died unmarried and had no children, biological or adopted, during his lifetime.

6. Decedent was predeceased by his parents, Merium Lee Massey (DOD: 6/18/2000) and Robert George Haug (DOD: 4/27/2017).

7. Decedent is survived by four half-siblings: Melinda Griffith, Tammy Lee Gaynon, Desteny Lee Haug, and Robert Lee Haug.

8. Therefore, Decedent's interest in the Property vested in fee simple absolute in Melinda Griffith, Tammy Lee Gaynon, Desteny Lee Haug, and Robert Lee Haug, his sole heirs-at-law, immediately upon his death, pursuant to T.C.A. §31-2-103. As of the filing of this Affidavit, ownership of the Property remains vested in fee simple in the names of **MELINDA GRIFFITH, TAMMY LEE GAYNON, DESTENY LEE HAUG, AND ROBERT LEE HAUG, AS TENANTS IN COMMON.**

FURTHER AFFIANT SAYETH NOT.

SWORN this 20th day of August 2025.

Vicki Ketreece Yokley

Vicki Ketreece Yokley, *Affiant*

STATE OF TENNESSEE)
COUNTY OF Davidson)

Personally appeared before me, the undersigned, a Notary Public in and for said County and State, **Vicki Ketreece Yokley,** the within named Affiant, 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.

Sworn to and subscribed before me, the undersigned Notary Public, this 20th day of August 2025.

BRIAN SWEGLES
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY

NOTARY PUBLIC
My commission expires: 01/24/28

THIS INSTRUMENT PREPARED BY (and return to):
Martin Heller Potempa & Sheppard, PLLC
2122 21st Avenue South
Nashville, Tennessee 37212
(615) 800-7096

STATE OF TENNESSEE

CERTIFICATION OF VITAL RECORD

EXHIBIT 1

TENNESSEE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

STATE FILE NUMBER 2024 069952

1. Decedent's Legal Name: DANIEL LEE HAUG			2. Sex: MALE	3. Date of Death: 10/28/2024
4. Time of Death (Approx.): 08:37 PM	5a. Age: 63	6. Date of Birth: 11/15/1960	7. Birthplace: DETROIT, MI	
8a. Place of Death: DECEDENT'S HOME				
8b. Facility Name: 209 CEDARVIEW DRIVE		8c. City or Town: ANTIOCH		8d. County of Death: DAVIDSON
9. Marital Status: NEVER MARRIED	10. Surviving Spouse (name prior to first marriage)	11a. Decedent's Usual Occupation: BOXED BATTERIES		11b. Kind of Business/Industry: AUTOMOBILE MANUFACTURER
12. Social Security Number: [redacted]	13a. Residence-State or Foreign Country: TENNESSEE	13b. County: DAVIDSON		13c. City or Town: ANTIOCH
13d. Street and Number: 209 CEDARVIEW DRIVE		13e. Inside City Limits? YES	13f. Zip Code: 37013	14. Was Decedent ever in US Armed Forces? NO
15. Decedent's Education: HIGH SCHOOL GRADUATE OR GED COMPLETED	16. Decedent of Hispanic Origin? NO, NOT SPANISH/HISPANIC/LATINO	17. Decedent's Race: WHITE		
18. Father's Name: ROBERT GEORGE HAUG		19. Mother's Name Prior to First Marriage: MARIUM LEE MASSEY		
20a. Informant's Name: EARL H FLIPPEN JR	20b. Relationship to Decedent: FRIEND	20c. Mailing Address: 1171 WALLER ROAD, BRENTWOOD, TN 37027		
21a. Method of Disposition: CREMATION		21b. Place of Disposition: MUSIC CITY CREMATORY SERVICE	21c. Location: NASHVILLE, TN	
22a. Signature of Funeral Director: ▶ /e/ WENDELL L. BYRD		22b. License Number: 2556	22c. Signature of Embalmer: ▶	22d. License Number:
23a. Name and Address of Funeral Home: WOODBINE FUNERAL HOME, INC. - HICKORY CHAPEL, 5852 NOLENSVILLE ROAD, NASHVILLE, TN 37211				23b. License Number: 760
24. Registrar's Signature: ▶ /e/ EDWARD G BISHOP III			25. Date Filed: 11/15/2024	

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: ▶ /e/ CODY BOGEMA	27b. License Number: 55961	27c. Date Signed: 11/08/2024
27d. Name and Address: CODY BOGEMA 6130 NOLENSVILLE PIKE, NASHVILLE, TN 37211		

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

29a. Was an Autopsy Performed? NO

29b. Were Autopsy Findings Available to Complete the Cause of Death?

30. Manner of Death: NATURAL	31. Did Tobacco Use Contribute to Death? NO	32. If Female: 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-15-2024

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ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE