STATE OF TENNESSEE
COUNTY OF DAVIDSON

Karen Johnson Davidson County
Batch# 1393816 AFFIDAVIT
03/17/2026 09:12:30 AM 5 pgs
Fees: $27.00 Taxes: $0.00
20260317-0021062

Affidavit of Survivorship

I, Phillip C Rich, (Affiant) being first duly sworn, depose and say:

Decedent Information: Sandra G. Rich (Decedent) passed away on 11/15/2018, in Davison, Tennessee. A certified copy of the death certificate is attached hereto as Exhibit A.

Property Ownership: Affiant and Decedent were owners of the real property located at 5156 Singing Hills Dr. Antioch, Tennessee 37013, and legally described as:

All that certain parcel of land situate in the City of Antioch, County of Davidson and State of Tennessee bounded and described as follows:

Land in Davidson County, Tennessee, being Lot No. 18 on the Plan of the Estates of Hickory Woods, as of record in Instrument No. 20010412-0036163, said Register's Office for said County, to which reference is made for a more complete description.

Tax id#: 176 01 0A 018.00

Vesting: The property was held by Affiant and Decedent as Tenancy by the Entirety per Deed recorded on 05/15/2006 as Instrument #: 20060516-0057142 in the Register's Office of Davidson County, Tennessee.

Survivorship: As the surviving owner, I am now the sole owner of said property.

Purpose: This affidavit is made to induce the Davidson County Register of Deeds to transfer the title to the survivor and to comply with Tennessee law.

Survivor Signature _____

Phillip C Rich
5156 Singing Hills Dr.
Antioch, Tennessee 37013

NOTARY ACKNOWLEDGEMENT

Subscribed ~~and sworn~~ to before me this 7 day of March ~~20~~26

~~Notary Public~~

My Commission Expires: 07/05/28

ANN STATHOS DONNELL
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY

Karen Johnson Davidson County
Batch# 666994 CERTIFICAT
06/28/2021 03:47:30 PM 2 pgs
Fees: $12.00 Taxes: $0.00
20210628-0087589

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2018 068026

DECEDENT

TYPE/PRINT IN PERMANENT BLACK INK

NAME OF DECEDENT (For use if Necessary, Include Maiden)

1. DECEDENT'S LEGAL NAME SANDRA HILL RICH			2. SEX FEMALE	3. DATE OF DEATH 11/15/2018	
4. TIME OF DEATH (Approx.) 07:40 AM	5a. AGE 70	5b. UNDER 1 YEAR Months / Days	5c. UNDER 1 DAY Hours / Minutes	6. DATE OF BIRTH 08/17/1948	7. BIRTHPLACE PORTLAND, TN
8a. PLACE OF DEATH DECEDENT'S HOME					
8b. FACILITY NAME 5156 SINGING HILLS DRIVE	8c. CITY OR TOWN ANTIOCH			8d. COUNTY OF DEATH DAVIDSON	
9. MARITAL STATUS MARRIED	10. SURVIVING SPOUSE (name prior to first marriage) PHILLIP CHESTER RICH	11a. DECEDENT'S USUAL OCCUPATION ARMY WIFE		11b. KIND OF BUSINESS/INDUSTRY OWN HOME	
12. SOCIAL SECURITY NUMBER -4817	13a. RESIDENCE-STATE OR FOREIGN COUNTRY TENNESSEE	13b. COUNTY DAVIDSON	13c. CITY OR TOWN ANTIOCH		
13d. STREET AND NUMBER 5156 SINGING HILLS 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			

PARENTS

18. FATHER'S NAME LLOYD SHORT	19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE ALMA DEE HILL

20a. INFORMANT'S NAME PHILLIP CHESTER RICH	20b. RELATIONSHIP TO DECEDENT HUSBAND	20c. MAILING ADDRESS 5156 SINGING HILLS DRIVE, ANTIOCH, TN 37013

DISPOSITION

21a. METHOD OF DISPOSITION BURIAL	21b. PLACE OF DISPOSITION MIDDLE TN VETERANS CEMETERY	21c. LOCATION NASHVILLE, TN	
22a. SIGNATURE OF FUNERAL DIRECTOR ▶ /e/ WILLIAM R. APPLETON	22b. LICENSE NUMBER 2769	22c. SIGNATURE OF EMBALMER ▶ /e/ J. David Dial	22d. LICENSE NUMBER 5170
23a. NAME AND ADDRESS OF FUNERAL HOME WOODBINE FUNERAL HOME, INC. - HICKORY CHAPEL, 5852 NOLENSVILLE ROAD, NASHVILLE, TN 37211			23b. LICENSE NUMBER 760

REGISTRAR

24. REGISTRAR'S SIGNATURE ▶ /e/ EDWARD G. BISHOP III	25. DATE FILED 12/10/2018

CERTIFIER

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CAUSE OF DEATH MUST COMPLETE AND SIGN WITHIN 48 HOURS.

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/ HARRY J BONNAIRE	27b. LICENSE NUMBER 020429	27c. DATE SIGNED 12/09/2018

27d. NAME AND ADDRESS
HARRY J BONNAIRE 607 DUE WEST AVE STE 102, MADISON, TN 37115

MEDICAL CERTIFICATION

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) →	a. CVA	
	DUE TO (OR A CONSEQUENCE OF)	
	b. VASCULAR DEMENTIA / COPD	
	DUE TO (OR A CONSEQUENCE OF)	
UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST	c.	
	DUE TO (OR A CONSEQUENCE OF)	
	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: NOT PREGNANT WITHIN PAST YEAR	
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	

TH-1059 (Rev. 8-17) RDA 10112

10493648

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.

Edward G. Bishop III
State Registrar

John J. Dreyzehner, M.D., MPH, FACOEM
COMMISSIONER

1 0 4 9 3 6 4 8

Date Issued DEC 11 2018

CERTIFICATION OF VITAL RECORD

20210628008758 9

202603170021062

EXHIBIT A – Legal Description

All that certain parcel of land situate in the City of Antioch, County of Davidson and State of Tennessee bounded and described as follows:

Land in Davidson County, Tennessee, being Lot No. 18 on the Plan of the Estates of Hickory Woods, as of record in Instrument No. 20010412-0036163, said Register's Office for said County, to which reference is made for a more complete description.

Being the same property as transferred by deed dated 05/21/2003, recorded 06/06/2003, from Southfork Development, Ltd, a Texas limited partnership, to Classic Homes BOS, L.P., recorded as Instrument #: 20030606-0078698.

Being further conveyed by deed dated 01/20/2004, recorded 01/26/2004, from Classic Homes BOS, L.P., to Timothy W. Ward and wife, Diane M. Ward, recorded as Instrument #: 20040126-0009835.

Being further conveyed by deed dated 07/23/2004, recorded 07/27/2004, from Classic Homes BOS, L.P., to Phillip C. Rich and Sandra G. Rich, recorded as Instrument #: 20040727-0089833.

Being further conveyed by deed dated 12/30/2004, recorded 01/14/2005, from Timothy W. Ward and wife, Diane M. Ward, to Classic Homes BOS, L.P., recorded as Instrument #: 20050114-0005302.

Being further conveyed by deed dated 05/15/2006, recorded 05/16/2006, from Classic Homes BOS, L.P., to Phillip C. Rich and Sandra G. Rich, recorded as Instrument #: 20060516-0057142. Certificate of Death for Sandra Hill Rich aka Sandra G. Rich; DOD 11/15/2018; State File Number: 2018-068026, recorded 06/28/2021, as Instrument #: 20210628-0087589.

Tax ID: 176 01 0A 018.00

When Recorded Return to:
TranStar National Title
2301 W Plano Pkwy #105
Plano, Texas 75075
888-766-8500 File # 531782

531782 Phillip C Rich 5156 Singing Hills Dr
Antioch, Tennessee 37013

Copy Certification

I, Chris Gaines, 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 03/07/2026 (date of document).

Affiant Signature

03/07/2026

Date

State of Texas

County of Collin

Sworn to and subscribed before me this 7th day of March, 2026.

Notary's Signature

MY COMMISSION EXPIRES: 03/01/2028

Notary's Seal (if on paper)

GENA STOFA
My Notary ID # 5832575
Expires March 1, 2028