Karen Johnson Davidson County
Batch# 1419756 AFFIDAVITH
05/13/2026 09:38:30 AM 5 pgs
Fees: $27.00 Taxes: $0.00
20260513-0042903

AFFIDAVIT OF HEIRSHIP

Personally appeared before me, the undersigned authority, a Notary Public in and for said County and State, duly commissioned and qualified, the within named Affiants, **Melissa W. Hall**, **Sherry J. Turner**, and **William R. DeSheles** (herein "Affiants"), who being first duly sworn, did depose and say:

1. That **Melissa W. Hall** declares that she is a resident of the County of **Davidson**, State of Tennessee.
2. That **Sherry J. Turner** declares that she is a resident of the County of **Davidson**, State of Tennessee.
3. That **William R. DeSheles** declares that he is a resident of the County of **Davidson**, State of Tennessee.
4. The Affiants declare that we have personal knowledge of the heirs-at-law of **George Douglas Hall (herein "Decedent").**
5. That **Decedent** died without a will (intestate) on **July 17, 2024**, a resident of **Davidson County**, Tennessee.
6. That **Decedent** was married to his wife, **Melissa W. Hall**, at the time of his death.
7. That **Decedent** did not have any children of his body and did not have any adopted children.
8. That at the time of **Decedent's** death, he owned an interest in certain real property, to wit:

   Lot or parcel of land situated in Davidson County, Tennessee, as follows:

   Being Lot No. 111 on the Map of the Subdivision of Lots 3 and 4 and part of Lots 5 and 6 in Cumberland Nurseries, as of record in Book 332, page 148, Register's Office for said County.

   Said Lot No. 111 fronts 50 feet on the northerly side of Jay Street and runs back between parallel lines 158.3 feet more or less to an alley.

   Being the same property conveyed to George Douglas Hall, unmarried, from Melvin E. Hall and wife, Esther Ruth Hall, by Warranty Deed dated February 13, 1980, and recorded on February 25, 1980, of record in Book 5569, Page 531, Register's Office for said County.

   The said George Douglas Hall having since married, the said George Douglas Hall died on July 17, 2024, leaving his wife, Melissa W. Hall, as his sole heir-at-law.

   This improved property has a common address of 102 Jay Street, Nashville, TN 37210.

   Map and Parcel 119 06 008.00

9. That George Douglas Hall was one and the same person as George D. Hall.
10. See TennCare release and death certificate for George Douglas Hall attached hereto and made a part hereof.

Further, Affiants sayeth not.

(Signature page(s) to follow)

IN TESTIMONY WHEREOF, we hereunto subscribe our names this 12th day of May 2026.

Melissa W. Hall, Affiant

Sherry J. Turner, Affiant

William R. DeSheles, Affiant

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Personally appeared before me, the undersigned authority, a Notary Public in and for said County and State, the within named Melissa W. Hall, Sherry J. Turner, and William R. DeSheles, with whom I am personally acquainted, or proved to me on the basis of satisfactory evidence, and who acknowledged that they executed the within instrument for the purposes therein contained as their free acts and deeds.

Witness my hand and official seal at office, this 12th day of May 2026.

Notary Public
My Commission Expires: _____

MARY KATHRYN CHARLTON
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
My Commission Expires JAN 4, 2027

Prepared by:
Mary Kathryn Charlton, attorney
Cindy S. Smith, P.C., Attorneys at Law
P.O. Box 292004
Nashville, TN 37229

TN Division of TennCare

RFR PROCESSING UNIT
310 GREAT CIRCLE RD., 3W
NASHVILLE, TN 37243
Phone: (615) 741-0636, Fax (615) 413-1941
Email: RFR.TENNCARE@TN.GOV

#

April 20, 2026

Mary Charlton
2739 Larmon Dr.
Nashville, TN 37204

RE: Hall, George Douglas Date of Death: 7/17/2024 SSN: xxx-xx-[redacted]
Our File Number: 185593

Mary Charlton:

The referenced decedent did not receive TennCare Long-Term Services and Supports and/or is not subject to estate recovery. Therefore, the State of Tennessee hereby releases the TennCare claim against this estate pursuant to Tenn. Code Ann. § 71-5-116(c)(2). This release is not a waiver of the right of the State of Tennessee to pursue criminal or civil penalties if fraud or abuse is found to exist pursuant to Tenn. Code Ann. § 71-5-2601, et seq.

This document is only relevant to TennCare's claim against the Decedent's probate estate. It does not apply to annuities, Special Needs Trusts, Pooled Special Needs Trust, Qualified Income Trusts, or any other type of trust that contains a Medicaid payback provision. If you need a payoff for this type of trust or annuity, you must contact TennCare at 844-629-0941, 2 at prompt, or via email at estate.recovery@tn.gov. Please provide the Decedent's death certificate and copy of the trust or annuity when making such a request.

Sincerely,

Joan Jackson
TennCare RFR Processing Unit

Under 2024

STATE OF TENNESSEE
CERTIFICATION OF VITAL RECORD

TENNESSEE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

STATE FILE NUMBER: 2024 044314

1. Decedent's Legal Name: GEORGE DOUGLAS HALL		2. Sex: MALE	3. Date of Death: 07/17/2024
4. Time of Death (Approx.): 13:55	5a. Age: 65	6. Date of Birth: [redacted]	7. Birthplace: NEW ORLEANS, LA
8a. Place of Death: INPATIENT			
8b. Facility Name: TRISTAR CENTENNIAL MEDICAL CENTER		8c. City or Town: NASHVILLE	8d. County of Death: DAVIDSON
9. Marital Status: MARRIED	10. Surviving Spouse (name prior to first marriage): MELISSA WEBB	11a. Decedent's Usual Occupation: SAMS CLUB	11b. Kind of Business/Industry: MAINTENANCE CLEANING
12. Social Security Number: [redacted]	13a. Residence-State or Foreign Country: TENNESSEE	13b. County: DAVIDSON	13c. City or Town: NASHVILLE
13d. Street and Number: 102 JAY ST	13e. Inside City Limits?: YES	13f. Zip Code: 37210	14. Was Decedent ever in US Armed Forces?: NO
15. Decedent's Education: 9TH - 12TH GRADE, NO DIPLOMA	16. Decedent of Hispanic Origin?: NO, NOT SPANISH/HISPANIC/LATINO	17. Decedent's Race: WHITE	
18. Father's Name: MELVIN E HALL		19. Mother's Name Prior to First Marriage: ESTER RUTH BOUGHTER	
20a. Informant's Name: MELISSA HALL	20b. Relationship to Decedent: WIFE	20c. Mailing Address: 102 JAY ST, NASHVILLE, TN 37210	
21a. Method of Disposition: BURIAL	21b. Place of Disposition: WOODLAWN CEMETERY	21c. Location: NASHVILLE, TN	
22a. Signature of Funeral Director: ▶ /e/ ROBERT H WHITLEY	22b. License Number: 3818	22c. Signature of Embalmer: ▶ /e/ JOHN ROY TAYLOR	22d. License Number: 4202
23a. Name and Address of Funeral Home: ELLIS FUNERAL HOME AND CREMATION SERVICE, 2627 NOLENSVILLE PIKE, NASHVILLE, TN 37211-2216			23b. License Number: 775
24. Registrar's Signature: ▶ /e/ EDWARD G BISHOP III		25. Date Filed: 07/22/2024	

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/ JENNIFER A JOHNSON	27b. License Number: 042435	27c. Date Signed: 07/21/2024
27d. Name and Address: JENNIFER A JOHNSON 2300 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). 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. BRAIN DEATH	
	b. INTRACRANIAL HEMORRHAGE	
	c. THROMBOCYTOPENIA	
	d. HYPERTENSION EMERGENCY	

Part II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I: LIVER TRANSPLANT, END STAGE RENAL DISEASE ON DIALYSIS	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.

Date Issued: Apr-28-2026

Edward G. Bishop III
State Registrar

John R. Dunn, DVM, PhD, EMBA-SL
Commissioner

202605130042903

AFFIDAVIT FOR RECORDING

I, Cindy S. Smith (print name), do hereby make oath that I am 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 May 12, 2026 (date of document).

Signature of above

5/12/26

Date

State of Tennessee

County of Davidson

Sworn to and subscribed before me this 12th day of May, 2026.

Notary

KIMBERLY J. THOMPSON
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY
My Commission Expires JAN. 22 2030

MY COMMISSION EXPIRES: