Owners:	Prepared by:
Connie Worrell Morgan 8209 Luree Lane Hermitage, TN 37076	Toni Waynick Rutgerson Attorney at Law 200 Nashboro Boulevard PO Box 17116 Nashville, TN 37217
Send tax notice to: Connie Worrell Morgan 8209 Luree Lane Hermitage, TN 37076	Map and Parcel No.: 075 14 0 025.00

AFFIDAVIT OF HEIRSHIP (REAL ESTATE)

Karen Johnson Davidson County
Batch# 1452423 AFFIDAVITH
07/29/2026 10:53:30 AM 5 pgs
Fees: $27.00 Taxes: $0.00
20260729-0069683

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Comes now the affiants, Billy Joe Davis, II and Billy Joe Davis, III, being first duly sworn according to law, and being of lawful age, and pursuant to T.C.A. § 30-2-712, hereby swear to the following of the affiants' own free will and based upon the affiants' personal knowledge and familiarity having been a neighbor/known the family for many years:

1. MAMIE YORK WORRELL, also known as MAMIE ELIZABETH YORK WORRELL, a widow and resident of Davidson County, Tennessee, who died intestate on February 11, 2008 as evidenced by a copy of the death certificate attached hereto as *Exhibit A*, held a fee simple interest in the following described real property ("Property"):

> Land in Davidson County, Tennessee, being Lot No. 95 on the Plan of Hermitage Estates, of record in Book 3300, pages 70 and 71, Register's Office for said County.
>
> Said Lot No. 95 fronts 75 feet on the west side of Luree Lane and extends back 224.5 feet on the south line and 235.35 feet on the north line to a dead line in the rear on which it measures 100 feet.
>
> Being part of the property conveyed to Clyde L. Worrell and wife Mamie Y. Worrell by deed of record at Book 3533, page 339. Clyde L. Worrell having predeceased Mamie Y. Worrell leaving her as sole owner by right of survivorship.
>
> This is improved property commonly known as:
> **8209 Luree Lane**
> **Hermitage, TN 37076**

2. An Inheritance Tax Closing Letter from the Tennessee Department of Revenue is attached hereto as *Exhibit B*.
3. Mamie York Worrell's only child was Connie Worrell Morgan.
4. Mamie York Worrell had no predeceased children.
5. By operation of law, at the death of Mamie York Worrell, title to the Property was vested as follows:

Connie Worrell Morgan, an undivided, fee simple interest

Further, affiant sayeth naught.

Billy Joe Davis II

BILLY JOE DAVIS, II

SWORN TO AND SUBSCRIBED BEFORE ME this 24th day of July, 2026.

Notary Public

My Commission Expires: 3-20-28

STATE OF TENNESSEE
COUNTY OF Wilson

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared Billy Joe Davis, II, the within named affiant, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that he executed the foregoing instrument for the purposes therein contained as his free act and deed.

SWORN TO AND SUBSCRIBED BEFORE ME this 24th day of July, 2026.

Notary Public

My Commission Expires: 3-20-28

Further, affiant sayeth naught.

BILLY JOE DAVIS, III

SWORN TO AND SUBSCRIBED BEFORE ME this 24th day of July, 2026.

Notary Public

STATE OF TENNESSEE
COUNTY OF Wilson

My Commission Expires; 3-20-25

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared Billy Joe Davis, III, the within named affiant, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person described in the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that he executed the foregoing instrument for the purposes therein contained as his free act and deed.

SWORN TO AND SUBSCRIBED BEFORE ME this 24th day of July, 2026.

Notary Public
My Commission Expires: 3-20-25

CERTIFICATION

I, Toni Rutgerson, do hereby make oath that I am a licensed attorney 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 the 24 day of July, 2026.

Affiant Signature Date 7/27/26

State of Tennessee;
County of Davidson
Sworn to and subscribed before me on this 27 day of July, 2026.

Notary Public
My Commission Expires:

METROPOLITAN GOVERNMENT OF NASHVILLE & DAVIDSON COUNTY
Office of Vital Records

Exhibit A

0800855

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last): Mamie Elizabeth York Worrell
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): February 11, 2008
4. SOCIAL SECURITY NUMBER (of Deceased): [redacted]
5. AGE (Last Birthday) (Years): 77
6. DATE OF BIRTH (Month, Day, Year): June 12,1930
7. BIRTHPLACE (City and State or Foreign Country): Lavergne, TN
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 Yes 2 X No
8a. PLACE OF DEATH (Check only one): Hospital: 1 X Inpatient 2 ER/Outpatient 3 DOA 4 Nursing Home 5 Residence 6 Other (Specify):
8b. FACILITY NAME (If not institution, give street and number): Summit Medical Center
8c. CITY, TOWN, OR LOCATION OF DEATH: Hermitage
8d. COUNTY OF DEATH: Davidson
10. MARITAL STATUS (Married, Never Married, Widowed, Divorced) (Specify): Widowed
11. SURVIVING SPOUSE (If wife, give maiden name):
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired): Main Frame Manager
12b. KIND OF BUSINESS/INDUSTRY: Bell South Telephone Company
13a. RESIDENCE-STATE: TN
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Hermitage
13d. STREET AND NUMBER OR RURAL LOCATION: 8209 Luree Lane
CENSUS TRACT
13e. INSIDE CITY LIMITS? 1 X Yes 2 No
13f. ZIP CODE: 37076
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No If Yes, specify Cuban, Mexican, Puerto Rican, etc.) Yes O X No
15. RACE-American Indian, Black, White, etc. (Specify): White
16. DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (0-12): 12; College (1-4 or 5+):

PARENTS

17. FATHER'S NAME (First, Middle, Last): Frank Wesley York
18. MOTHER'S NAME (First, Middle, Maiden Surname): Lorena Gambill

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Connie Morgan
19b. RELATIONSHIP TO DECEASED: Daughter
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 8209 Luree Ln., Hermitage, TN 37076

DISPOSITION

20a. METHOD OF DISPOSITION: 1 X Burial 2 Cremation 3 Removal from State 4 Donation 5 Other (Specify)
20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): Mt. Juliet Memorial Gardens
20c. LOCATION-City or Town, State: Mt. Juliet, TN
21a. SIGNATURE OF FUNERAL DIRECTOR: Tracey Bond
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 3930
21c. SIGNATURE OF EMBALMER:
21d. LICENSE NUMBER OF EMBALMER:
22a. NAME AND ADDRESS OF FUNERAL HOME: Bond Memorial Chapel 1098 Weston Drive, Mt. Juliet, TN 37122
22b. LICENSE NUMBER OF FUNERAL HOME: 1041

REGISTRAR

23. REGISTRAR SIGNATURE: John W. Rhoden Sr. R.R.
24. DATE FILED (Month, Day, Year): February 15, 2008

CERTIFIER

25. PHYSICIAN - To the best of my knowledge, death occurred at the date and place, and due to the cause(s) and manner as stated. 1 X SIGNATURE AND TITLE OF CERTIFIER: [signature]
25b. LICENSE NUMBER: 18349
25c. DATE SIGNED (Month, Day, Year): 2/15/08
26. MEDICAL EXAMINER - On the basis of examination and/or investigation, in my opinion, death occurred at the date and place, and due to the cause(s) and manner as stated. 2 SIGNATURE AND TITLE OF MEDICAL EXAMINER
26b. LICENSE NUMBER
26c. DATE SIGNED (Month, Day, Year)

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CERTIFICATE MUST COMPLETE AND SIGN MEDICAL CERTIFICATION WITHIN 48 HRS.

27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print): Robert Gaston, Jr., M.D. 3939 Central Pike, Hermitage, TN 37076

CAUSE OF DEATH

28. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line.
Approximate Interval Between Onset and Death
IMMEDIATE CAUSE (Final disease or condition resulting in death): a. congestive Heart failure
DUE TO (OR AS A CONSEQUENCE OF): b. Valvular heart disease
Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that INITIATED events resulting in death) LAST
DUE TO (OR AS A CONSEQUENCE OF): c.
DUE TO (OR AS 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? 1 Yes 2 X No
29b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? 1 Yes 2 No
30. MANNER OF DEATH: 1 X Natural 2 Accident 3 Suicide 4 Homicide 5 Pending Investigation 6 Could not be Determined
31a. DATE OF INJURY (Month, Day, Year)
31b. TIME OF INJURY
31c. INJURY AT WORK? 1 Yes 2 No
31d. DESCRIBE HOW INJURY OCCURRED
31e. PLACE OF INJURY-At home, farm, street, factory, office building, etc. (Specify)
31f. LOCATION (Street and Number or Rural Route No. Town, City or Town, State)

I hereby certify the above to be a true and correct copy of the original document on file in this department. This certified copy is valid only when printed on security paper showing the red embossed seal of the Metropolitan Government of Nashville and Davidson County. Alteration or erasure voids this certification.
Tennessee Code Annotated 68-3-101 et seq., Vital Records Act of 1977.

[redacted]
Tonya Y Foreman
Local Registrar

FEB 15 2008
Date Issued

CERTIFICATION OF VITAL RECORD

202607290069683

N0019001

7755504080821

TENNESSEE DEPARTMENT OF REVENUE

Exhibit B

Inheritance Tax Closing Letter (This is not a bill for

ESTATE OF MAMIE E WORRELL
ATTN: DAVID J WAYNICK
P O BOX 148058
NASHVILLE TN 37214

August 24, 2008

Account Type:	INHERIT TX
Account No.:	441239358
Date of Death:	February 11, 2008
County:	DAVIDSON
Social Security No.:	[redacted]-1286

A sworn return for inheritance tax has been filed with this department by the representative of the above estate.

As provided in Section 67-8-420, Tennessee Code Annotated, this receipt or certificate authorizes the court of the county in which such estate was administered to permit a final settlement or accounting by the estate representative.

The liability, as denoted in this closure letter, has been paid to the State of Tennessee. This is not a bill:

Inheritance Tax:	$0.00
Estate Tax:	$0.00
Interest:	$0.00
Penalty:	$0.00
Total:	$0.00

DETACH BELOW AND RETAIN FOR YOUR RECORDS

TENNESSEE DEPARTMENT OF REVENUE

ESTATE OF MAMIE E WORRELL
ATTN: DAVID J WAYNICK
P O BOX 148058
NASHVILLE, TN 37214

August 24, 2008

Account Type:	INHERIT TX
Account No.:	441239358
Date of Death:	February 11, 2008
County:	DAVIDSON
Social Security No.:	408-48-1286

A sworn return for inheritance tax has been filed with this department by the representative of the above estate.

As provided in Section 67-8-420, Tennessee Code Annotated, this receipt or certificate authorizes the court of the county in which such estate was administered to permit a final settlement or accounting by the estate representative.

The liability, as denoted in this closure letter, has been paid to the State of Tennessee. This is not a bill:

Inheritance Tax:	$0.00
Estate Tax:	$0.00
Interest:	$0.00
Penalty:	$0.00
Total:	$0.00

RV-N8019001