Karen Johnson Davidson County
Batch # 1472537 AFFIDAVITH
09/15/2026 09:13:17 AM 4 pgs
Fees: $22.00 Taxes: $0.00
20260915-0085440

This instrument prepared based on information provided by the parties and not independent verification by:

C. Michael Robinson
Robinson Law, PLLC
2705 Gallatin Pike
Nashville, Tennessee 37216
Telephone: (615) 320-9977

Map & Parcel: 061 07 296.00
Address Owner: Sheryl Whitbey
1118 Kenwood Drive
Nashville, TN 37216
Send Tax Bill: Same

AFFIDAVIT OF HEIRSHIP

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

The undersigned having been first duly sworn according to law, deposes and states as follows:

1. That I am an adult resident of Nashville, Davidson County, Tennessee and I have personal knowledge of the matters stated in this Affidavit.

2. That Jacqueline Ann Husband, also known as Ann Husband (hereinafter "the Decedent"), died on August 7, 2026 owning real property located at 1118 Kenwood Drive, Nashville, Tennessee 37216 and more particularly described as follows:

> Land in Davidson County, Tennessee, being Lot Nos. 10, 11 and the westerly half of Lot No. 12 of Block "B" on the plan of Jackson Park, Section No. 1, as of record in Plat Book 843, page 17, Register's Office for Davidson County, Tennessee.
>
> Said Lot No. 10 fronts 60 feet on the south side of Kenwood Drive and runs back between lines 177 feet on the east line, 173 feet on the west line to a dead line in the rear on which it measures 60 feet 5 inches.
>
> Said Lot No. 11 and the westerly part of Lot No. 12 front together 105 feet 3 inches on the southerly side of Kenwood Drive and run back 238 feet on the westerly line and 191 feet 8 inches, more or less, on the easterly line to a dead line measuring 90 feet thereon.
>
> Being the same property conveyed to Ann Husband, widow, by Quitclaim Deed from Jacqueline Ann Husband, widow, dated July 13, 2012, of record as Instrument No. 20120719-0063386, Register's Office for Davidson County, Tennessee. Ann Husband and Jacqueline Ann Husband are one and the same person.

This is improved property known as 1118 Kenwood Drive, Nashville, Tennessee 37216.

3. The Decedent's spouse, Charles P. Husband, predeceased her.

4. The Decedent was widowed and unmarried at the time of her death.

5. The Decedent died intestate.

6. The Decedent had one child, who survived her: Sheryl Whitbey, 1118 Kenwood Drive, Nashville, TN 37216.

7. That the Decedent's Certificate of Death is attached hereto as Attachment A.

8. That the above referenced child of the Decedent, Sheryl Whitbey, now owns the Decedent's interest in the above referenced property by operation of law pursuant to Tenn. Code Ann. § 31-2-104(b)(1).

9. That Tenn. Code Ann. § 67-4-409(a)(3)(D) exempts this instrument from tax and Tenn. Code Ann. § 67-4-409(a)(5) further provides the valuation oath is unnecessary, said Affidavit being used to evidence transfer of title to the property to a beneficiary.

FURTHER, AFFIANT SAY NOT.

Dated this the 14 day of September, 2026.

I, **MICHAEL MONTANA,** after having first been duly sworn do hereby swear that the foregoing is true and accurate to the best of my knowledge, information, and belief.

M. Montana

MICHAEL MONTANA

SWORN to and subscribed before me this 14th day of September, 2026.

CHARLES MICHAEL ROBINSON
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
MY COMMISSION EXPIRES 11-8-2028

Charles Robinson

NOTARY PUBLIC

My commission expires: 11-8-28

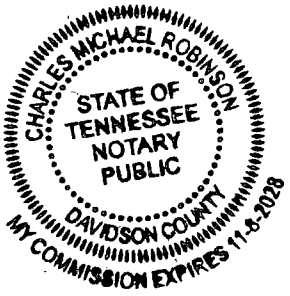
M. Montana

MICHAEL MONTANA

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

Before me a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared **MICHAEL MONTANA,** 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 and acknowledged that he or she executed the same as his or her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal at my office in said County, on this the 14th day of September, 2026.



Charles Robinson

NOTARY PUBLIC

My Commission Expires: 11-8-28

STATE OF TENNESSEE
CERTIFICATION OF VITAL RECORD

Attachment A

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER: 2026 049901

1. Decedent's Legal Name: JACQUELINE ANN HUSBAND		2. Sex: FEMALE	3. Date of Death: 08/07/2026
4. Time of Death (Approx.): 08:00 PM	5a. Age: 91	6. Date of Birth: 04/22/1935	7. Birthplace: NASHVILLE, TN
8a. Place of Death: DECEDENT'S HOME			
8b. Facility Name: 1118 KENWOOD DR	8c. City or Town: NASHVILLE		8d. County of Death: DAVIDSON
9. Marital Status: WIDOWED	10. Surviving Spouse (name prior to first marriage)	11a. Decedent's Usual Occupation: TEACHER'S AIDE	11b. Kind of Business/Industry: EDUCATION
12. Social Security Number: [redacted]7460	13a. Residence-State or Foreign Country: TENNESSEE	13b. County: DAVIDSON	13c. City or Town: NASHVILLE
13d. Street and Number: 1118 KENWOOD DR	13e. Inside City Limits?: YES	13f. Zip Code: 37216	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: JACK TILLMAN		19. Mother's Name Prior to First Marriage: MARY ELIZABETH SELLERS	
20a. Informant's Name: SHERYL WHITBY	20b. Relationship to Decedent: DAUGHTER	20c. Mailing Address: 1118 KENWOOD DR, NASHVILLE, TN 37216	
21a. Method of Disposition: CREMATION	21b. Place of Disposition: AFFILIATED CREMATORY	21c. Location: NASHVILLE, TN	
22a. Signature of Funeral Director: ▶ /e/ GALE B. ROBINSON	22b. License Number: 5683	22c. Signature of Embalmer: ▶	22d. License Number
23a. Name and Address of Funeral Home: PHILLIPS-ROBINSON FUNERAL HOME, 2707 GALLATIN PIKE, NASHVILLE, TN 37216			23b. License Number: 331
24. Registrar's Signature: ▶ /e/ EDWARD G BISHOP III		25. Date Filed: 08/18/2026	

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/ ALLIE KENITRA HENDERSON-FITTS	27b. License Number: 044801	27c. Date Signed: 08/14/2026

27d. Name and Address: ALLIE KENITRA HENDERSON-FITTS 5653 FIRST BLVD, STE 630, HERMITAGE, TN 37076

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. ATHEROSCLEROTIC VASCULAR DISEASE	
	b.	
	c.	
	d.	

Part II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I: TYPE 2 DIABETES, SACRAL PRESSURE ULCER, UN-STAGE ABLE

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?: UNKNOWN	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

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

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

Date Issued: Aug-19-2026

0184020009

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE