Karen Johnson
Batch # 1480290
10/02/2026 10:07:12 AM
Fees: $42.00 Taxes: $0.00
Davidson County
AFFIDAVITH
8 pgs
20261002-0090978

AFFIDAVIT OF SURVIVORSHIP
(Pursuant to Tenn. Code Ann. § 66-24-101(a)(27))

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Before me, the undersigned Notary Public, personally appeared **Katherine B. Carpenter**, who, after being duly sworn, states as follows:

1. Affiant

The undersigned Affiant, **Katherine B. Carpenter** is identified in the Quitclaim Deed referenced below as **Katherine B. Falk.** Affiant states that **Katherine B. Carpenter** and **Katherine B. Falk** are one and the same person. Affiant married **William Neal Carpenter** on **October 30, 2015** and subsequently became known as **Katherine B. Carpenter**.

Affiant has also executed a separate Name Affidavit, acknowledged before a notary public, confirming that **Katherine B. Falk** and **Katherine B. Carpenter** are one and the same person. Copies of the marriage certificate and Name Affidavit are attached hereto as Exhibit A and incorporated herein by reference.

Affiant is an adult resident of Davidson County, Tennessee, residing at 945 Russell Street, Nashville, TN 37206. Affiant makes this Affidavit based upon personal knowledge of the facts stated herein.

2. Property

The real property that is the subject of this Affidavit is located in Davidson County, Tennessee, and has the following legal description:

Land in Davidson County, Tennessee, being Lot No. 193 on the Plan of Holt Woods, Section Twelve, of record in Plat Book 9700, page 723, Register's Office for Davidson County, Tennessee, to which plan reference is hereby made for a more complete description.

Property Address: 1812 Bryce Circle, Nashville, TN 37211
Map and Parcel Number: Map 172150A, Parcel 23400 CO

3. Recorded Deed and Express Right of Survivorship

The above-described property was conveyed to **Janice A. Buck** as to a ninety-eight percent (98%) interest, and **Katherine B. Falk** as to a two percent (2%) interest, as Grantees, **as joint tenants with the right of survivorship, and not as tenants in common**, by Quitclaim Deed recorded in the Register's Office for Davidson County, Tennessee.

That Quitclaim Deed was recorded in the Register's Office of Davidson County, Tennessee, on **July 30, 2013**, as **Instrument No. 20130730-0079021**.

4. Prior Instrument

The Quitclaim Deed recorded as Instrument No. **20130730-0079021** identifies the source of the Grantors' interest as **Instrument No. 20120522-0044329**, recorded in the Register's Office of Davidson County, Tennessee, on **May 22, 2012**.

5. Death of Joint Tenant

Janice A. Buck died on February 24, 2025 in Nashville, Davidson County, TN. A certified copy of her death certificate is attached hereto as **Exhibit B** and incorporated herein by reference.

6. Surviving Joint Tenant and Resulting Ownership

At the time of **Janice A. Buck's** death, **Janice A. Buck** and **Katherine B. Falk, now known as Katherine B. Carpenter,** held title to the above-described property as joint tenants with the right of survivorship and not as tenants in common, as expressly stated in the Quitclaim Deed.

Affiant is the surviving joint tenant identified in the Quitclaim Deed. Upon the death of **Janice A. Buck**, the express right of survivorship contained in the Quitclaim Deed became effective, and Affiant, as the surviving joint tenant, became the sole owner of the property in fee simple.

7. Purpose of Affidavit

This Affidavit is made for the purpose of establishing and placing of record the fact of the death of **Janice A. Buck** and identifying the surviving joint tenant and resulting ownership of the above-described real property for purposes of the real property records of Davidson County, Tennessee.

Further Affiant sayeth not.

Katherine Carpenter

Katherine Boyd Carpenter, Affiant/Surviving Joint Tenant

Date: 10-2-2026

NOTARY ACKNOWLEDGEMENT

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Subscribed and sworn to before me, a Notary Public, this 2nd day of October, 2026.

Notary Public

My commission expires: 07/28/2027

KRYSTAL BRUNSON
STATE OF TENNESSEE NOTARY PUBLIC
CHEATHAM COUNTY

PREPARED BY:
Katherine B. Carpenter
945 Russell Street
Nashville, TN 37206

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Personally appeared before me, Krystal Brunson Notary Public, **Katherine B. Carpenter**, the within named bargainor, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged that such person executed the within instrument for the purposes therein contained.

Witness my hand, at office, this 2nd day of October, 2026.

Notary Public

KRYSTAL BRUNSON
STATE OF TENNESSEE NOTARY PUBLIC
CHEATHAM COUNTY

My Commission Expires: 07/28/2027

PREPARED BY:
Katherine B. Carpenter
945 Russell Street
Nashville, TN 37206

EXHIBIT A

Documentation of Name Change

Certificate of Marriage

STATE OF TENNESSEE

COUNTY OF DAVIDSON
To Anyone Legally Authorized to Celebrate the Rites of Matrimony
You Are Hereby Licensed to Celebrate the

Rites of Matrimony

Between *William Neal Carpenter* 33 AGE

and *Katherine Boyd Falk* 43 AGE

and for so doing this shall be your warrant.

Given under my hand and official seal, this *27th* day of *October* in the year of our Lord Two Thousand *Fifteen*

Brenda Wynn
COUNTY CLERK

BY: Pam Thompson
DEPUTY CLERK

By Virtue of A License from the Davidson County Clerk,
I have this day celebrated the Rites of Matrimony between
The parties herein named, as authorized in the foregoing license.

Given under my hand this the 30TH day of October A.D. 2015

Book No. 0249
Page No. 228

SIGNATURE OF OFFICIANT

NAME AFFIDAVIT

This is to certify that Katherine B. Falk and Katherine B. Carpenter are one and the same person.

Katherine Carpenter

Subscribed and sworn to before me, in my presence, this 19 day of December, 2019 a Notary Public in and for the County of Davidson.

Victoria A. Horton

(Notary Public)

My commission expires Nov. 8, 2022**, 20 ____.**

VICTORIA A. HORTON
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY

EXHIBIT B

Certified Death Certificate of Janice A. Buck

STATE OF TENNESSEE

CERTIFICATION OF VITAL RECORD

TENNESSEE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

STATE FILE NUMBER 2025 012992

1. Decedent's Legal Name			2. Sex	3. Date of Death
JANICE AKIN BUCK			FEMALE	02/24/2025
4. Time of Death (Approx.)	**5a. Age**	**6. Date of Birth**	**7. Birthplace**	
00:55	91	09/13/1933	NASHVILLE, TN	
8a. Place of Death				
NURSING HOME/LONG-TERM CARE				
8b. Facility Name		**8c. City or Town**	**8d. County of Death**	
BELMONT VILLAGE GREEN HILLS		NASHVILLE	DAVIDSON	
9. Marital Status	**10. Surviving Spouse (name prior to first marriage)**	**11a. Decedent's Usual Occupation**	**11b. Kind of Business/Industry**	
WIDOWED		HIGH SCHOOL TEACHER	SECONDARY EDUCATION	
12. Social Security Number	**13a. Residence-State or Foreign Country**	**13b. County**	**13c. City or Town**	
2839	TENNESSEE	DAVIDSON	NASHVILLE	
13d. Street and Number	**13e. Inside City Limits?**	**13f. Zip Code**	**14. Was Decedent ever in US Armed Forces?**	
945 RUSSELL ST	YES	37206	NO	
15. Decedent's Education	**16. Decedent of Hispanic Origin?**	**17. Decedent's Race**		
MASTER'S DEGREE	NO, NOT SPANISH/HISPANIC/LATINO	WHITE		
18. Father's Name		**19. Mother's Name Prior to First Marriage**		
JAMES BOYD AKIN		KATHERINE SIMPSON BECKETT		
20a. Informant's Name	**20b. Relationship to Decedent**	**20c. Mailing Address**		
KATHERINE BOYD CARPENTER	DAUGHTER	945 RUSSELL ST, NASHVILLE, TN 37206		
21a. Method of Disposition	**21b. Place of Disposition**	**21c. Location**		
CREMATION	ELLIS CREMATORY	NASHVILLE, TN		
22a. Signature of Funeral Director	**22b. License Number**	**22c. Signature of Embalmer**	**22d. License Number**	
▶ /e/ GERALD D BOWEN	30327	▶		
23a. Name and Address of Funeral Home			**23b. License Number**	
SIMPLE CREMATION AND FUNERAL SERVICES, 423 SMYRNA SQUARE DRIVE, STE C, SMYRNA, TN 37167			1432	
24. Registrar's Signature		**25. Date Filed**		
▶ /e/ EDWARD G BISHOP III		02/27/2025		

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	27b. License Number	27c. Date Signed
▶ /e/ JENNIFER LOWE ELLIS	028060	02/27/2025

27d. Name and Address

JENNIFER LOWE ELLIS 1539 ASHLAND CITY RD SUITE C, CLARKSVILLE, TN 37040

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. ALZHEIMER'S DISEASE	YEARS
	b.	
	c.	
	d.	

Part II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I

CHRONIC OBSTRUCTIVE PULMONARY DISEASE

29a. Was an Autopsy Performed? NO

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

30. Manner of Death	31. Did Tobacco Use Contribute to Death?	32. If Female:
NATURAL	UNKNOWN	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

Ralph Alvarado, MD, FACP
Commissioner

Date Issued: Feb-28-2025

0 1 6 9 9 2 7 3 1

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE