

Citizen's Fedl SALA

Policy #407456

70 P Ridge Rd., Munster

SURVIVORSHIP AFFIDAVIT

R-59036

974782

STATE OF INDIANA

COUNTY OF LAKE

S. S.

On this April 14, 1988 before me personally appeared Beverly A. Walters

(insert date)

formerly Beverly Ann Clark

to me personally known, who being duly sworn on oath did say that:

- 1. Affiant resides at the address given below affiant's signature;
- 2. Affiant is OWNER
(state interest of affiant in the above premises as "owner," "son of owner," etc.)
- 3. Said premises were formerly owned as joint tenants or as tenants by the entireties by Donald Lee Clark and Beverly Ann Clark;
- 4. Said Donald Lee Clark
(fill in name of co-tenant who died)

died on March 25, 1985

leaving no will;
(insert "a" or "no"; if will left, attach a copy)

- 5. The total value of the taxable estate of said deceased including joint tenancies, tenancies by the entireties, individual ownerships of both real and personal property, and insurance does not exceed the sum of \$_____ and to the best of affiant's knowledge there is no estate or inheritance tax liability by reason of the death of said decedent;
- 6. Where this affidavit relates to a tenancy by the entireties, were the parties ever divorced? no

(If answer is "Yes," identify the divorce proceedings: _____);

FILED

7. Affiant's relationship to the deceased was wife

Caro N. Antone
AUDITOR LAKE COUNTY

Signature: Beverly A. Walters
Beverly A. Walters

Address: 1607 River Dr., Hammond, Ind. 46324

Subscribed and sworn to before me by the affiant

this April 15, 1988
(insert date)

Margie Kelly
Notary Public Margie Kelly

My Commission Expires 7-25-89

County of Residence: Lake

This instrument prepared by Beverly A. Walters 1259

CHICAGO TITLE INSURANCE COMPANY in Pl. Book 29, page 8, in Lake County, Indiana.
INDIANA DIVISION
Lot 6, Beverly 5th Addition, in the City of Hammond, as shown
STATE OF INDIANA/S.S.W.C.
LAKE COUNTY
FILED FOR RECORD
APR 20 1 07 PM '88
LILLIAN A. BLASTIK
RECORDER LAKE COUNTY
GROWNS POINT, INDIANA 46307

#32-193-6

Handwritten initials and number 700

TYPE OR PRINT
PLAINLY WITH
UNFADING INK
THIS IS A
PERMANENT
RECORD

9-261-87 of 77
THIS CERTIFIES THE ABOVE IS A TRUE AND
COMPLETE COPY OF THE CERTIFICATE OF DEATH
ON FILE WITH THE HAMMOND HEALTH DEPT.
MAR 26 1985

Franklin J. Remade, M.D.
Date Issued

HAMMOND HEALTH COMMISSIONER

EMBALMER'S NAME: Ronald A. Reed

LICENSE No. 108

FUNERAL DIRECTOR'S SIGNATURE

FUNERAL DIRECTOR'S LICENSE No. 94

Walter H. Carter
FURNER HOME

LICENSE No. 750

FILED
APR 27 1985
DECEASED

USUAL RESIDENCE WHERE DECEASED LIVED IF DEATH OCCURRED IN INSTITUTION GIVE RESIDENCE BEFORE ADMISSION

PARENTS

DISPOSITION

M.D. OR D.O.

CAUSE

INDIANA STATE BOARD OF HEALTH
MEDICAL CERTIFICATE OF DEATH

State No. _____

Local No. 258

DECEASED--NAME 1 Donald L. Clark		SEX 2 Male	DATE OF DEATH (MONTH DAY YEAR) 3 March 25, 1985
RACE--(e.g. White, Black, American Indian, etc.) 4 White	AGE--Last Birthday 5a 50	UNDER 1 YEAR 5b	UNDER 1 DAY 5c
CITY, TOWN OR LOCATION OF DEATH 7a Hammond		HOSPITAL OR OTHER INSTITUTION 7c St. Margaret Hospital	IF HOSP OR INST. NAME NOT KNOWN, GIVE STREET AND NUMBER 7d Emer Rm
STATE OF BIRTH (If not in U.S.A. name country) 8 Indiana	CITIZEN OF WHAT COUNTRY 9 U.S.A.	MARRIED NEVER MARRIED WIDOWED DIVORCED (Specify) 10 Married	SURVIVING SPOUSE (If wife give her name) 11 Beverly Padgett
SOCIAL SECURITY NUMBER 13 303-36-3297		USUAL OCCUPATION (Give kind of work done during most of working life even if strange) 14a Professor	KIND OF BUSINESS OR INDUSTRY 14b Purdue University
RESIDENCE--STATE 15a Indiana	COUNTY 15b Lake	CITY, TOWN OR LOCATION 15c Hammond	
STREET AND NUMBER 15d 1607 N. River Drive		IS RESIDENCE ON A FARM? 15e YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	INSIDE CITY LIMITS (SPECIFY YES OR NO) 15f Yes
IS DECEASED OF SPANISH DESCENT? IF YES SPECIFY MEXICAN CUBAN PUERTO RICAN, ETC. 15g YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
FATHER--NAME 16 Charles Clark		MOTHER--MAIDEN NAME 17 Julia Mercer	
INFORMANT--NAME (Type or print) 18a Beverly Clark	RELATIONSHIP 18b Wife	MAILING ADDRESS 18c 1607 River Dr. Hammond, Indiana	
BURIAL, CREMATION, REMOVAL, OTHER (Specify) 19a Anatomical Gift		CEMETERY OR CREMATORY--FUNERAL HOME 19b Indiana University	LOCATION 19c Indianapolis, Indiana
DATE (MONTH DAY YEAR) 20a March 26, 1985		FUNERAL HOME--NAME AND ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP) 20b Kuiper Funeral Home 9039 Kleinman Rd. Highland, Indiana	
To the best of my knowledge, death occurred at the time, date and place and due to the causes stated 21a (Signature) George C. Rasch M.D.		DATE SIGNED (Mo. Day, Yr.) 21b 3/25/85	HOUR OF DEATH 21c M
NAME OF ATTENDING PHYSICIAN (Type or print) 21d George C. Rasch			
MAILING ADDRESS--PHYSICIAN 21e 1644 15th Avenue Munster, Indiana			
HEALTH OFFICER'S SIGNATURE 27a Franklin J. Remade, M.D.		DATE RECEIVED BY HEALTH DEPT. 27b MAR 26 1985	
PART I (a) IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c)) Acute Myocardial Infarction		Interval between onset and death hours	
(b) DUE TO OR AS A CONSEQUENCE OF Coronary artery disease		Interval between onset and death unknown	
(c) DUE TO OR AS A CONSEQUENCE OF		Interval between onset and death	
PART II OTHER SIGNIFICANT CONDITIONS--Conditions contributing to death but not related to cause given in PART I (a) 24		Date (Mo., Day, Year)	

LEO A. WALTERS
TO
BEVERLY ANN CLARK

BE IT REMEMBERED, That heretofore, to wit:
on the 9th day of APRIL
A. D. 1987, the following Marriage License was issued,
to wit:

MARRIAGE LICENSE

STATE OF INDIANA, LAKE COUNTY, ss:

To Any Person Empowered by Law to Solemnize Marriage — Greetings:

You are hereby authorized to join together as HUSBAND AND WIFE,

LEO A. WALTERS and BEVERLY ANN CLARK

according to the laws of the State of Indiana.

IN TESTIMONY WHEREOF, I KENNETH RAY PETERSON,

Clerk of the Lake Circuit Court, hereunto subscribe my name and affix the seal
of said court, at Crown Point, this 9th day
of APRIL, 1987

/s/KENNETH RAY PETERSON

Clerk Lake Circuit Court

BE IT FURTHER REMEMBERED, That afterwards, to wit: on the 28th day
of APRIL, 1987, the following Certificate of Marriage was filed in my office,

to wit:

STATE OF INDIANA, LAKE COUNTY, ss:

THIS CERTIFIES, That I joined in Marriage as Husband and Wife,

LEO A. WALTERS and BEVERLY ANN CLARK

on the 24th day of APRIL, 1987

/s/STEPHEN K. NASH, MINISTER

STATE OF INDIANA, LAKE COUNTY, ss:

I, KENNETH RAY PETERSON Clerk of the Circuit Court within and for said County of Lake, and State
of Indiana, do hereby certify the foregoing to be true and correct, copies of the Marriage License and Certificate of
Marriage of LEO A. WALTERS * AND * BEVERLY ANN CLARK
MALE BORN: NOVEMBER 14, 1933
FEMALE BORN: AUGUST 22, 1937, as the same now appear
of record in the Marriage Records in my office.

IN WITNESS WHEREOF, I have hereto subscribed my name and affixed the seal of said
court, at Crown Point, Indiana, on this 12th

day of MAY, 1987

Kenneth Ray Peterson
Clerk Lake Circuit Court
Paul Dubak
Deputy