

1579 James R. Gary 46404

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FILED

STATE OF INDIANA)
COUNTY OF LAKE)

IN RE DECEDENT:
VICTORIA DAVIDSON

MAR 23 1993

Anna N. Anton
AUDITOR LAKE COUNTY

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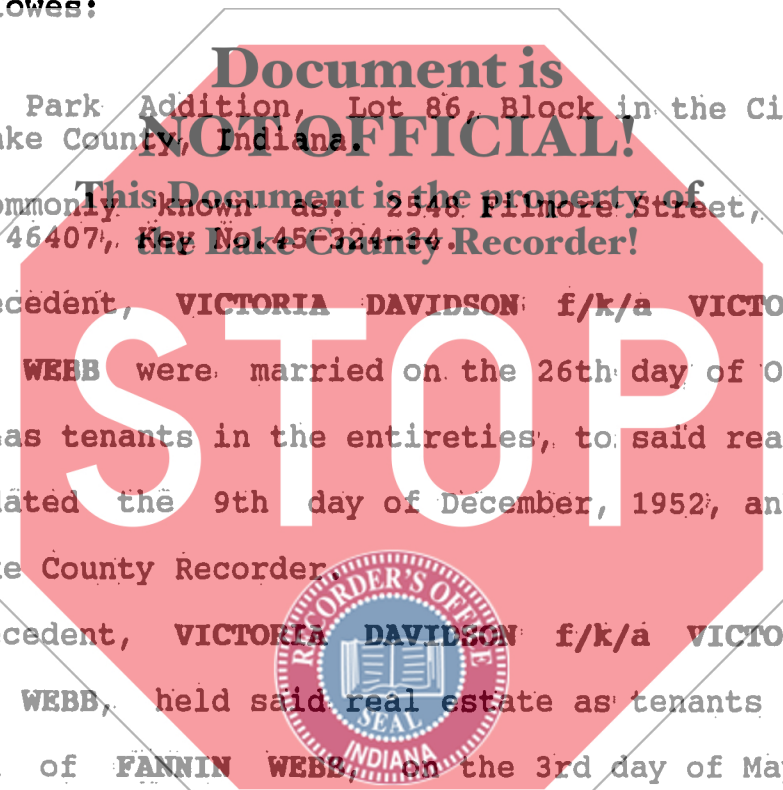
AFFIDAVIT OF SURVIVORSHIP

Comes now **JAMES HEWITT**, being duly sworn upon his oath and states as follows:

That **JAMES HEWITT**, is the owner in fee simple of the following described real estate located in Lake County, Indiana, more particularly described as follows:

Lincoln Park Addition, Lot 86, Block in the City of Gary, Lake County, Indiana.

More commonly known as 2548 Filmore Street, Gary, Indiana 46407, Key No. 45-324-34.



STATE OF INDIANA'S GEO. LAKE COUNTY RECORDER
MAR 23 11 37 AM '93
SARAH E. WILKINSON
RECORDER

That the decedent, **VICTORIA DAVIDSON f/k/a VICTORIA WEBB** and her husband, **FANNIN WEBB** were married on the 26th day of October, 1949, and acquired title, as tenants in the entireties, to said real estate, by deed of conveyance dated the 9th day of December, 1952, and recorded in the Office of the Lake County Recorder.

That the decedent, **VICTORIA DAVIDSON f/k/a VICTORIA WEBB**, and her husband, **FANNIN WEBB**, held said real estate as tenants in the entireties until the death of **FANNIN WEBB**, on the 3rd day of May, 1955, at which time the decedent, **VICTORIA DAVIDSON f/k/a VICTORIA WEBB**, acquired title to the real estate as the surviving tenant.

That the gross value of the estate of the decedent, **FANNIN WEBB**, her husband, as determined for the purpose of Federal Estate Taxes, was less than the value required for the filing of a Federal Estate Tax Return. As a consequence thereof, the estate of the decedent, **FANNIN WEBB**, her husband, was not subject to Federal Estate Tax.

01216

10.00

That the estate of FANNIN WEBB, her husband, was not subject to Indiana Inheritance Taxes.

That on the 19th day of December, 1983, the decedent conveyed said real estate to your affiant by Warranty Deed dated December 19, 1983, and recorded in the Lake County, Indiana Recorder's Office on the 25th day of September, 1983, as Document No. 727088.

That as a result of said conveyance of said real estate on the 19th day of December, 1983, your affiant acquired fee simple title to, and is the sole owner of, said real estate.

Further your affiant sayeth not.

Document is
NOT OFFICIAL!

This Document is the property of
JAMES HEWITT, Affiant
the Lake County Recorder!

STATE OF INDIANA)

COUNTY OF LAKE)

Subscribed and sworn to before me, a Notary Public, this 23rd day
of March, 1993.

Resident of County of Lake

My Commission Expires: 5/3/93

Linda Morita
Notary Public



INDIANA STATE BOARD OF HEALTH
 Division of Vital Records
 CORONER'S CERTIFICATE OF DEATH

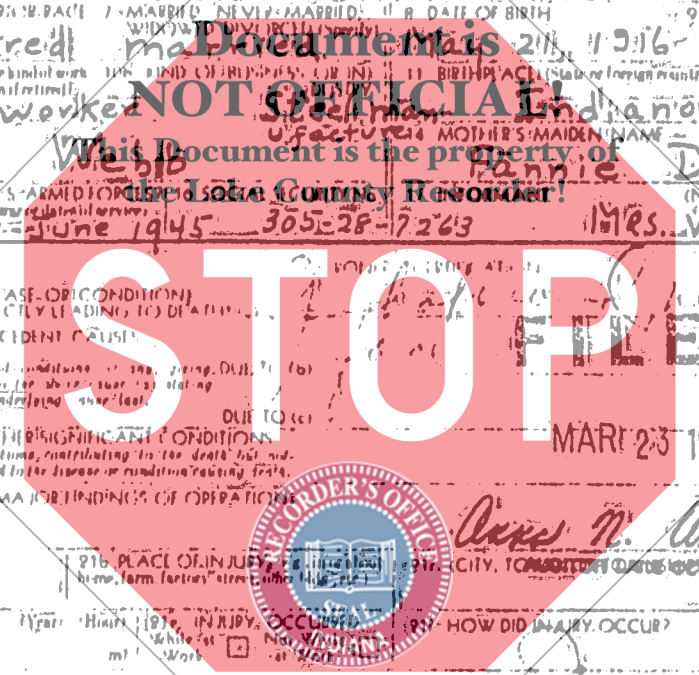
Local No. 55-571
 Death No.

EMBALMER'S NAME: Luther G. Moeris
 LICENSE NO.: 3845
1189

1 PLACE OF DEATH (City or County) Lake
GARY
 2 USUAL RESIDENCE (Where born and lived) (State) Indiana (County) Lake
 CITY (Include corporate limits, ZIP CODE) GARY
 3 STREET ADDRESS 2548 - Fillmore Street

4 NAME OF DECEASED (Full name) FAYMINI WIEBIRI
 SEX Male 5 RACE Coloredd 6 MARRIED (If previously married, give date of birth) 20, 1916
 7 AGE (In years, months, days) 38

8 OCCUPATION (Include full and part time, including military service) Steel worker
 9 BIRTH PLACE (State or foreign country) Indianola, Miss
 10 CITIZENSHIP (Country) U.S.A.
 11 FATHER'S NAME William 12 MOTHER'S MAIDEN NAME Dulgray
 13 WAS DECEASED IN MILITARY SERVICE (If so, give name of service) No
 14 DATE OF OPERATION May-June 1945 15 MAJOR FINDINGS OF OPERATION 305-28-7263
 16 NAME AND ADDRESS OF EMBALMER Mrs. Victoria Webb, 2548 Fillmore Street, Gary



17 CAUSE OF DEATH (Give only one cause per line for (a), (b), and (c))
 (DISEASE OR CONDITION) DIRECTLY LEADING TO DEATH
 (ANTICIPATED CAUSE)
 (OTHER SIGNIFICANT CONDITIONS)
 18 INTERVAL BETWEEN ONSET AND DEATH

19a DATE OF OPERATION
 19b MAJOR FINDINGS OF OPERATION
 19c PLACE OF INJURY (Home, farm, factory, street, other) Home
 19d CITY, TOWNSHIP OR COUNTY (COUNTY) (STATE)
 19e TIME (Month, Day, Year, Hour) OF INJURY, OCCURRED
 19f HOW DID INJURY OCCUR?
 19g (Specify) Nature, extent, and location of the serious lesions observed. Held on

20 SIGNATURE OF PHYSICIAN
 21 SIGNATURE OF CORONER
 22 SIGNATURE OF EMBALMER

23a REMOVE FROM FILE IN THIS OFFICE
 23b REMOVE FROM FILE IN THIS OFFICE
 24 NAME OF CEMETERY OR CREMATORY
 25 DELIVERY LOCATION
Indianola, Mississippi 01215
 26 SIGNATURE OF FUNERAL DIRECTOR
 27 ADDRESS
Luther G. Moeris MORTUARY, GARY