STATE OF INDIANA): SS : COUNTY 'OF' LAKE

92042875

FFIDAVIT

DONALD A. LASER, being first duly sworn, states:

- He is one and the same person as Donald Laser.
- 2. He is a resident of Lake County, Indiana, and his current address is 14166 Grant Street, Crown Point, Indiana 46307.
- Affiant states that he is the surviving spouse of 3:.. Imajean Laser, who died a resident of Lake County, Indiana, on May 29, 1993.
- At the time of her death, Donald A. Laser and 4. were the owners of the following Imajean Laser, husband and wife, described real estate Indiana:

PARCEL The West 230.78 feet of the South 1/4 of Sette on Be, Clownshipe 35 North, Range 8 West of the 2nd Principal Meridian, County, Indiana.

The North 20 feet of West 130 feet of Lot 1, Prudence Plaza, Unit No. 1, as per plat thereof, recorded in Plat Book 35, Page in the Office of the Recorder of Lake County, Indiana.

At the time of her death, Donald A. Laser and Imajean Laser were not divorced and were living together as husband and wife.

- Affiant further states that no federal estate tax is due by reason of the death of Imajean Laser.
- 7. This Affidavit is made by the undersigned to confirm that ownership in the above-described real estate is now vested in the undersigned, Donald A. Laser, a/k/a Donald Laser, and to induce the Auditor of Lake County to reflect the correct ownership of such real estate on said Auditor's records.

Dated June 17, 1993.

Verald a Facer Rosal Laser

JUN 30 1993

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STATE OF INDIANA); SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 17th day of June, 1993, personally appeared Donald A. Laser, a/k/a Donald Laser, who stated that the facts contained in the foregoing Affidavit are true and correct and acknowledged the execution of the above and foregoing Affidavit.

WITNESS my hand and Notarial Seal.

MARGARET PERZ, Notary Public

MY COMMISSION EXPIRES:

September 12, 1995

Resident of Lake County Document is

This Document is the property of the Lake County Recorder!

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	CORONER On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner as stated															
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:	Joseph A. Kacmar M.D., 123 N. Court Street, Crown Point, Indiana 46307															
j				M.D., 123		ert Street, Crown Point				, India	ana	4630				
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USE ONLY	☐ Homicide	Could not be Determined		building, etc. (Spec	ary i									•		

34h: MOTOR VEHICLE ACCIDENT? (Yes or no) If yes specify driver, passenger pedestrien, etc.

02208

SDH06-004

State Form 10110 (R3 / 3-92)

34g DATE PRONOUNCED DEAD (Month Day, Year)

DEATHCER PO 1