

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

STATE OF INDIANA

95010714

95 FEB 28 AM 10:03

COUNTY OF LAKE

RECORDED
RECORDER

2

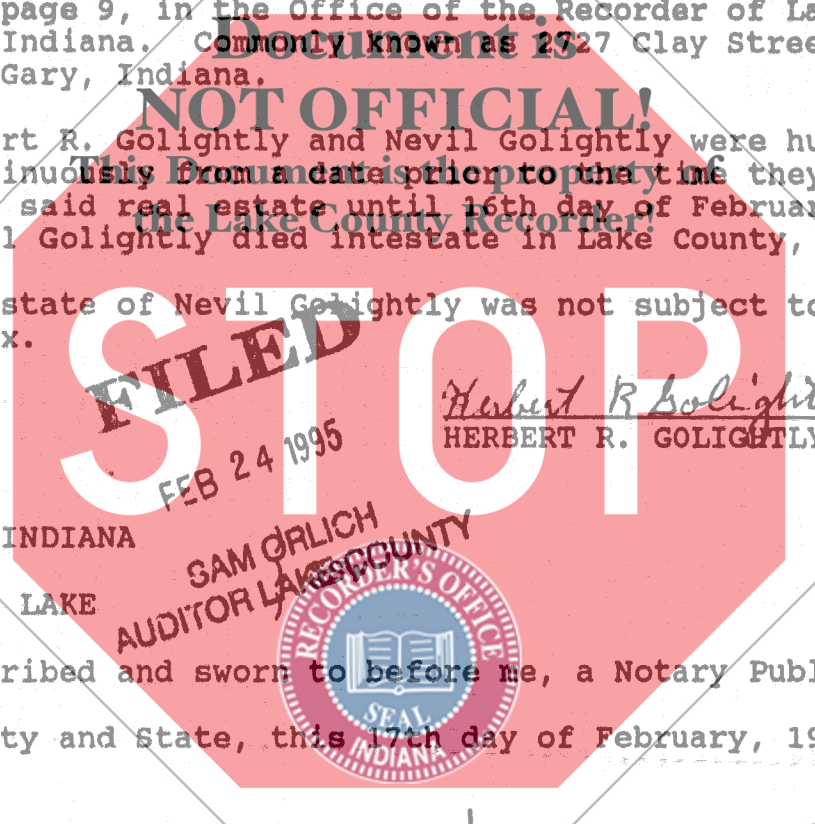
AFFIDAVIT

Comes now the Affiant, Herbert R. Golightly, being first duly sworn upon his oath, deposes and says that he is the surviving spouse of Nevil Golightly, deceased. By virtue of the fact that he is the surviving spouse of Nevil Golightly, deceased, he is the sole owner of the following-described real estate, to-wit:

Key # 19-46-25426
Lots 25 and 26 in Block 1, in First Subdivision to East Gary, as per plat thereof, recorded in Plat Book 7, page 9, in the Office of the Recorder of Lake County, Indiana. Commonly known as 2727 Clay Street, East Gary, Indiana.

Herbert R. Golightly and Nevil Golightly were husband and wife continuously from a date prior to the time they became owners of said real estate until 16th day of February, 1986, when Nevil Golightly died intestate in Lake County, Indiana.

The estate of Nevil Golightly was not subject to federal estate tax.



Herbert R. Golightly
HERBERT R. GOLIGHTLY

STATE OF INDIANA

COUNTY OF LAKE

SAM ORLICH
AUDITOR LAKE COUNTY



Subscribed and sworn to before me, a Notary Public in and for said County and State, this 17th day of February, 1995.

Laurie E. Krieger
LAURIE E. KRIEGER, Notary Public



My Commission Expires: 9-19-98
Resident of Porter County

THIS INSTRUMENT WAS PREPARED BY:
MELISSA B. COHEN
Attorney at Law
8585 Broadway - Suite 899
Merrillville, Indiana 46410
(219) 769-1600

↑

001066

JS

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

Below for State Office Use

A
B
C
D
E
F
G
H
I
J
K
L
M
N
O
P
Q
R
S
T
U
V
W
X
Y
Z

THIS CERTIFIES THE ABOVE IS A TRUE AND
COMPLETE COPY OF THE CERTIFICATE OF
DEATH. IN FILE WITH THE LAKE COUNTY
HEALTH DEPT.

FEB 19 1986

LICENSE No. 104237

CHARLES WELLS

EMBALMER'S NAME

FUNERAL DIRECTOR'S SIGNATURE

FUNERAL HOME No. 300169

FUNERAL DIRECTOR'S LICENSE No. 200699

Local No. 341-86

INDIANA STATE BOARD OF HEALTH
MEDICAL CERTIFICATE OF DEATH

State No.

TYPE OR PRINT IN PERMANENT INK FOR INSTRUCTIONS BY HANDSON

DECEASED

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

PARENTS

DISPOSITION

M.D. OR D.O.

CONDITIONS OF DEATH WHICH GAVE RISE TO UNDERLYING CAUSE STATING THE UNDERLYING CAUSE LAST

CAUSE

DECEASED NAME NEVIL VERNA GOLIGHTLY		SEX Female	DATE OF DEATH February 16, 1986
RACE White	AGE 72	DATE OF BIRTH Sept. 4, 1913	CITY OF BIRTH Lake
CITY TOWN OR VILLAGE OF DEATH Lake Station		HOSPITAL OR OTHER INSTITUTION Home - 2727 Clay Street	IF HUNG OR NOT DOA
STATE OF BIRTH Illinois	CITIZEN OF WHAT COUNTRY U.S.A.	MARRIED NEVER MARRIED Married	WAS DECEASED EVER IN U.S. ARMED FORCES? No
SOCIAL SECURITY NUMBER 328-26-9117	USUAL OCCUPATION Homemaker	KIND OF BUSINESS OR INDUSTRY Home	
RESIDENCE STATE Indiana	COUNTY Lake	CITY TOWN OR VILLAGE Lake Station	STREET AND NUMBER 2727 Clay Street
IS DECEASED OF SPANISH DESCENT? IF YES SPECIFY MEXICAN, CUBAN, PORTORICAN, ETC. NO		IS RESIDENT ON A FARM? NO	INSIDE CITY LIMITS Yes
FATHER'S NAME Lee Kingsley	MOTHER'S MAIDEN NAME Vergie Garrett	CITY OR TOWN Lake Station, Indiana 46405	
RELATIONSHIP Herbert Golightly, Husband	MAILING ADDRESS 2727 Clay Street	CITY OR TOWN Portage, Indiana 46405	
DISPOSITION Burial	CEMETERY OR CREMATORY Calvary Cemetery	CITY OR TOWN Lake Station	
DATE February 18, 1986	FRUM FUNERAL HOME, INC., 1307 Central Avenue, Lake Station		
NAME OF ATTENDING PHYSICIAN Sompon Sinsuwananukorn, M.D.	DATE SIGNED 2-17-86	HOUR OF DEATH 2-19-86	
ADDRESS 12197 76th Street, Merrillville, Indiana 46410	DATE RECEIVED BY LOCAL HEALTH OFFICER FEB 24 1995		
CAUSE Respiratory failure due to severe Asthma & Chronic lung disease	OTHER SIGNIFICANT CONDITIONS Steroid Myopathy - Osteoporosis		

001067