

FILED

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

OCT 17 1997
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97 OCT 20 AM 10:02

SAM ORLICH
AUDITOR LAKE COUNTY

MORRIS W. CARTER
RECORDER

Chicago Title Insurance Company

SURVIVORSHIP AFFIDAVIT

On this Sept. 9, 1997 before me personally appeared _____
(insert date)

(Greg Malenshek) Gregory Malenshek

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 _____ co-owner, brother _____;
(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
_____ Mark Malenshek _____ and _____ Gregory Malenshak _____;
- 4. Said _____ Mark Malenshek _____
(fill in name of co-tenant who died)
died on _____ March 14, 1997 _____
leaving _____ no _____ will;
(insert "a" or "no"; if will left, attach a copy)

5. The legal description of the premises in question is:

The West 440 Feet of that part of the Southeast quarter of the Southeast quarter of Section 31, Township 36 North, Range 8 West of the 2nd Principal Meridian, in Lake County Indiana lying South of the South Right of Way line of the Elgin, Joliet and Eastern Railway Company, in Lake County, Indiana .

6. Is there Federal Estate or State Inheritance tax liability by reason of the death of said

decadent? Yes No

If yes, then estimated taxes due are \$ _____ undetermined, at this time.

The taxes due are paid or unpaid.

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Chicago Title Insurance Company

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7. Where this affidavit relates to a tenancy by the entireties, were the parties ever divorced?

.....

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

.....);

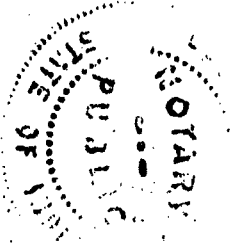
8. Affiant's relationship to the deceased was.....brother.....

Signature: *Gregory Malenshek*

Printed NameGregory Malenshek.....

Address:2820 E. 35th Avenue.....

.....Lake Station, In.
.....



Subscribed and sworn to before me by the affiant

this *Sept. 10, 1997*.....

(Insert date)

Linda L. Timm
.....
Notary Public

Printed NameLINDA L. Timm.....

My County of Residence is: *LAKE*.....

In the State of *INDIANA*.....

My Commission Expires *March 14, 1998*.....

This instrument prepared byGregory Malenshek.....