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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
FILED
97 DEC 15 AM 9:33

MORRIS W. CAMPTER
RECORDER
SAM ORLICH
AUDITOR LAKE COUNTY

STATE OF INDIANA)
) ss: RE: MARY L. ZELENCIK
COUNTY OF LAKE) DOD: OCTOBER 8, 1987

**AFFIDAVIT AS TO
TENANCY BY ENTIRETIES**

DAVID P. ZELENCIK, being first duly sworn upon oath, deposes and says:

That he is an adult and the son of Mary L. Zelencik, who died on October 8, 1987 and Anthony S. Zelencik, who died on November 9, 1996.

That he has personal knowledge that the decedent and his former wife who predeceased him were owners by the entireties of the following described real estate, to wit:

Lots 11 and 12 in BLock 5 in Original Town of Griffith, as per plat thereof, recorded in Plat BOk 2, page 45, in the Office of the Recorder of Lake County, Indiana
Commonly known as: 326 Arbogast St., Griffith, IN
Key # 26-125-11

That said parties were husband and wife when they took title to the above described real estate; and that both remained in title and lived continuously together as husband and wife until her death, testate, on the date above given.

Affiant further states that he knows of his own knowledge that the value of the gross estate of the above decedent, Mary L. Zelencik, at the time of her death, within the meaning of the Federal Estate laws, was less than that required for the filing of a Federal Estate Tax Return, and that the estate of said decedent was not subject to any Federal Estate taxes.

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19.00
20604

Affiant further states that all outstanding debts and obligations of the decedent, Mary L. Zelencik including funeral expenses and expenses of last illness were fully paid and discharged and that there is no estate proceeding pending and there are no outstanding claims or obligations against said decedent.

David P. Zelencik

DAVID P. ZELENČIK
Affiant

Subscribed and sworn to before me, a Notary Public residing in Lake County, Indiana, on this 4th day of December, 1997.

Kathryn M. Murphy
KATHRYN M. MURPHY
Notary Public

My Commission Expires: 4-27-2000
My County of Residence: Lake

This Instrument Prepared By:

JOHN F. HILBRICH #7513-45
HILBRICH, CUNNINGHAM & SCHWERD
2637 - 45th Street
Highland, IN 46322 ↑
Phone: (219) 924-2427

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

Below for State Office Use

A _____
B _____
C _____
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LICENSE No. FDE1016173

EMBALMER'S NAME Edgar Gleim

FUNERAL HOME LICENSE No. FDE1014511

FUNERAL DIRECTOR'S SIGNATURE *Edgar Gleim*

FUNERAL HOME No. FDE300-7500

Local No. 1907-87

TYPE OR PRINT IN PERMANENT INK FOR INSTRUCTIONS SEE HANDBOOK

DECEASED

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

PARENTS

DISPOSITION

M.D. OR D.O.

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

CAUSE

INDIANA STATE BOARD OF HEALTH
MEDICAL CERTIFICATE OF DEATH

State No. _____

1 DECEASED - NAME FIRST MIDDLE LAST Mary L. Zelencik		SEX Female	DATE OF DEATH (MONTH DAY YEAR) Oct. 8, 1987
2 RACE - (e.g. White, Black, American Indian, etc.) (Specify)	3 AGE - Last Birthday (Year)	4 UNDER 1 YEAR MOS DATE	5 UNDER 1 DAY HOURS MINES
White	69	6a	6b
7a CITY, TOWN OR LOCATION OF DEATH Crown Point		7c HOSPITAL OR OTHER INSTITUTION (Name if not in other give street and number) St. Anthony Hospital	
8 STATE OF BIRTH (If not in U.S.A. Name Country)		9 CITIZEN OF WHAT COUNTRY	
Indiana		U.S.A.	
10 MARRIED NEVER MARRIED, WIDOWED, DIVORCED (Specify)		11 SURVIVING SPOUSE (If wife give maiden name)	
Married		Anthony Zelencik	
12 SOCIAL SECURITY NUMBER		13 USUAL OCCUPATION (Give kind of work done during most of working life. Specify if seasonal)	
313-20-7758		14a Home Maker	
14b KIND OF BUSINESS OR INDUSTRY		15a RESIDENCE - STATE	
Own Home		Indiana	
15b CITY, TOWN OR LOCATION		15c STREET AND NUMBER	
Griffith		326 N. Arbogast	
15d IS RESIDENCE ON A FARM? (Specify Yes or No)		15e INSIDE CITY LIMITS (Specify Yes or No)	
NO		Yes	
16 IS DECEASED OF SPANISH DESCENT? IF YES SPECIFY MEXICAN, CUBAN, PUERTO RICAN, ETC.			
NO			
17 FATHER - NAME (FIRST MIDDLE LAST)		18 MOTHER - MAIDEN NAME (FIRST MIDDLE LAST)	
Vincent Matej		Mary Foltz	
19a INFORMANT - NAME (Type or print) RELATIONSHIP		19b MAILING ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE ZIP)	
Anthony Zelencik HUS.		326 N. Arbogast Griffith, Indiana	
20a BURIAL, CREMATION, REMOVAL, OTHER (Specify)		20b CEMETERY OR CREMATORY - FUNERAL HOME: LOCATION CITY OR TOWN STATE	
Burial		Chapel Lawn Cemetery Schererville, Indiana	
21a DATE (MONTH DAY YEAR)		21b FUNERAL HOME - NAME AND ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN STATE ZIP)	
Oct. 12, 1987		Kuiper Funeral Home 9039 Kleinman Rd. Highland, Indiana	
22a To the best of my knowledge death occurred at the time, date and place and due to the cause(s) stated (Signature)		22b DATE SIGNED (Month Day Year)	
<i>Ernest C. Mirrett</i>		10/12/87	
23a NAME OF ATTENDING PHYSICIAN (Type or Print)		23c HOUR OF DEATH	
ERNEST C. MIRRETT		M	
24a MAILING ADDRESS - PHYSICIAN		24b HEALTH OFFICER'S SIGNATURE	
9001 BROADWAY MERRILLVILLE, IND 46410		<i>Edgar Gleim</i>	
25a HEALTH OFFICER'S SIGNATURE		25b DATE RECEIVED BY LOCAL HEALTH OFFICER	
<i>Edgar Gleim</i>		10-12-87	
26 PART I IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a) AND (b))		Interval between onset and death	
(a) Cardiac - hepatic - renal failure		3 weeks	
(b) DUE TO OR AS A CONSEQUENCE OF Post operative open heart surgery		5 weeks	
(c) DUE TO OR AS A CONSEQUENCE OF Left Ventricular aneurysmectomy		Interval between onset and death	
27 PART II OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not related to cause given in PART I (a), (b) and (c)		28 AUTOPSY (Specify Yes or No)	
		No	

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