

COMMUNITY TITLE COMPANY

- An Indiana Corporation 421 West \$1st Avenue Merrillville, Indiana 46410 219-736-2810

AFFIDAVIT

STATE	OF	INDIANA	- 1	SS
COUNTY	OF	LAKE	Ś	

NEAL E. SCHUBICK

, being first duly

sworn upon oath, deposes and says:

1. That Affiant's spouse, JANETTE A. SCHUBICK died (without leaving a will) (leaving a will) on 19 9 at ST. MARY MEDICAL CENTER

That they were duly and legally married at the time they acquired title as husband and wife to the following described real estate:

LOT 3 IN BLOCK 2 IN VILLA SHORES SIXTH ADDITION TO HOBART, AS PER PLAT THEREOF, RECORDED APRIL 14, 1953 IN PLAT BOOK 29 PAGE 101, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

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- 3. That the marital relationship which existed between them at the time they acquired title to said real estate remained in effect and unbroken until the date of (his) (her) death.
- 4. That all funeral expenses in connection with the death of said decedent have been paid in full.
- 5. That all of the assets of said decedent which would be includable for Federal Estate Tax purposes, including joint bank accounts and life insurance on decedent's life were not sufficient to necessitate payment of Federal Estate Tax.

Further affiant sayeth not.

NEAL E. SCHUBICK

Subscribed and sworn to before me a Notary Public, this day of SEPTEMBER, 1999.

Notary Public

My Commission expires:

10/05/01

SEN 30 1999

County of Residence:

Porter

PETER BENJAMIN LAKE COUNTY AUDITOR

This Instrument prepared by NEAL E. SCHUBICK

0032

TOTAL P.01

* ATTENTION E SS# we need to is voluntary and refusal. * Local No	there will be r	esponsibilities no penalty fo 2/- 9	2			
TYPE/PRINT	1. DECEASED-N	AME (First Middle A. SCHUBI	Last)			
PERMANENT BLACK INK		RITY NUMBER				
	NO NO	AN?				
DECEDENT	9b. FACILITY NAME (If not institution, gi St. Mary Medical Center					
	(Specify) Married		Ne			
	Indiana	·STATE	tab. Lak			
	13e. ZIP CODE	131. INSIDE CIT	Yes			
	46342	13g ON A FAR] Yes			
PARENTS	George Ol	AME (Firel, Middle, ASON	Last)			
INFORMANT	20a INFORMANT Neal E. Sci	'S NAME (Type/Po hubick	vnt)			
	214 METHOD OF Burial Donation	DISPOSITION Cremation Other (Specif	о П П			
DISPOSITION	224 EMBALMER James J. K					

	1	AME (First Middle A. SCHUB						2 sex Fen	nale	34 TIME OF		April 30	of death (m)), 1999	nsh Dey Yr)
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	84 WAS DECEDENT A US VETERAN?			No. YEAR LAST SERVED IN U.S. ARMED FORCES		HOSPITAL National Impatient		DE PLACE OF DEATH (Che		·····	ng Home		(Specify)	
	No		N/A		☐ ER/Outpatient		DOA Residence							
NT	St. Mary M	1edical Cen	ter	e street and number)				Hobari		CATION OF DEAT		Lake	Y OF DEATH	
i	Married Net			iii. Burviving spouse (If wife, give mader name) eal E, Schubick			12a DECEDENT'S USUAL OCCUPATION done during most of working life. Do Homemaker					12b. KIND OF BUSINESS INDUSTRY Home		
			Lake	COUNTY 3	1. /	136. CITY TOWN OR LOCATION Hobart					34. STREET AND NUMBER 1012 W. 42nd Ave			
	13e. ZIP CODE	13f. INSIDE CI	TY LIMIT	LIMITS 14. CITIZEN OF		15 WAS DECEDENT OF HISPANIC		DRIGIN? 16. RACE - Ame		CE - American Ind	merican Indian		17. DECEDENT'S EDUCATION (Specify only highest grade completed)	
	46342	13g. ON A FAF	AM?	USA		an, Puerto Rica		FI	(Sr	hite	Eli	mentary/Secon	idary (0-12)	College (1-4 or 5+)
3	18 FATHER'S NA	AME (First, Middle,	Last)	Th:	c Do	011400	244	. •		(First, Middle, Mai	den Suman	12		
	George Ol	afson I's name (Type/P		Thi		cum			a Peters		yo		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
NT	Neal E. Sc		'nnt)	1	the L	1012 W. 42			Ker	Noute Number, Cit	ly or Town,	State. Zip Code		Relationship ISDAND
	214 METHOD OF		□ E	ntombment	21b OAT	E AND PLACE					21c	LOCATION - C		
	☐ Bunal ☐ Donation	Cremation Other (Speci		emoval from State	May 4,	place) 1999 / Cremato	ry					ortage, Ind		
ION	224 EMBALMER James J. K					EMBALMERS LI			23	WAS DEATH RE				
	24a SIGNATURE	OF FUNERAL DI	RECTOR			24b. LIG	ENSE NUME	ER		E ADDRESS AND	LICENSE	NUMBER OF F	UNERAL HON	IE .
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	/\ \hat{\sigma} -		_ \	1 KDO		EDO:	006463		Rees	Funeral Ho	me, Inc	l. Habar	iki 462.	12
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		arrest, shoc	k, or hea	rt failure. List only one co		eath. Do not en		e terms such	600 W	/. Old Ridge	me, Inc e Road	, Hobart	Aç	
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