

STATE OF INDIANA
LAKE COUNTY
FILED

2000 019307

2000 MAR 22 AM 9:26

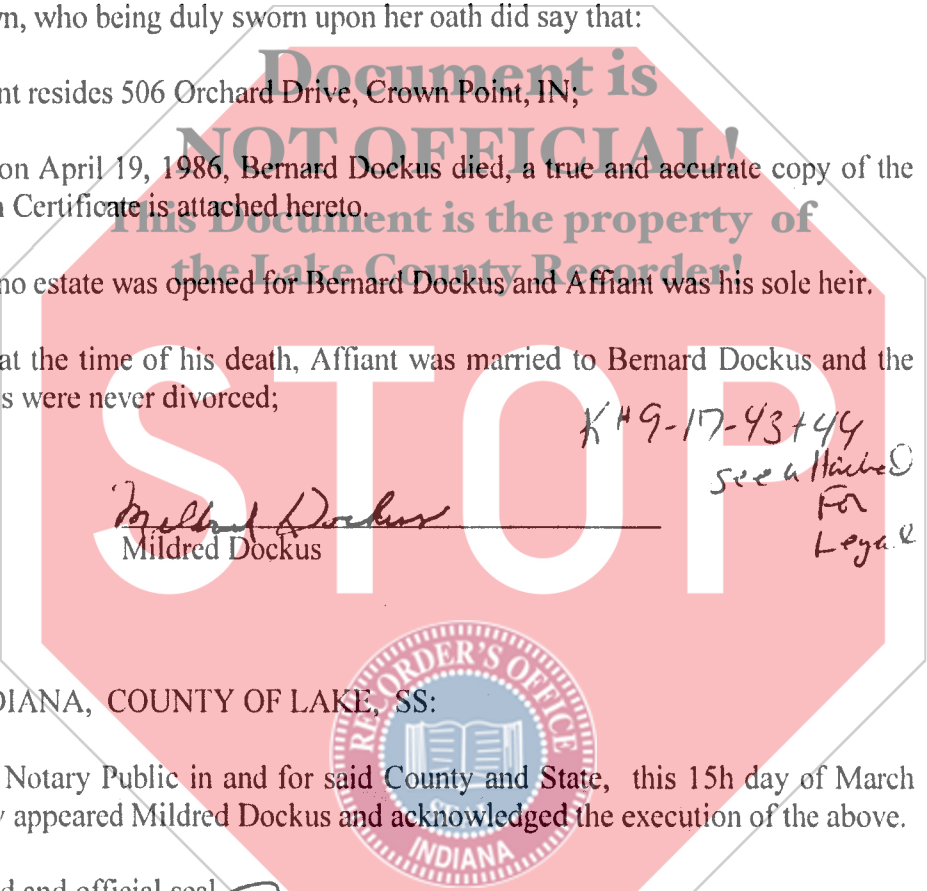
SURVIVORSHIP AFFIDAVIT

NOTARY PUBLIC CENTER
RECORDS

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

On this 15th day of March, 2000, before me personally appeared, Mildred Dockus to me personally known, who being duly sworn upon her oath did say that:

1. Affiant resides 506 Orchard Drive, Crown Point, IN;
2. That on April 19, 1986, Bernard Dockus died, a true and accurate copy of the Death Certificate is attached hereto.
3. That no estate was opened for Bernard Dockus and Affiant was his sole heir.
4. That at the time of his death, Affiant was married to Bernard Dockus and the parties were never divorced;



Mildred Dockus
Mildred Dockus

*K# 9-17-43+44
see attached
for
Legal*

STATE OF INDIANA, COUNTY OF LAKE, SS:

Before me a Notary Public in and for said County and State, this 15th day of March 2000, personally appeared Mildred Dockus and acknowledged the execution of the above.

Witness my hand and official seal.

Robert E. Stochel

NOTARY PUBLIC

FILED

MAR 21 2000

Robert E. Stochel

Printed Name

**PETER BENJAMIN
LAKE COUNTY AUDITOR**

My Commission Expires: 01/22/08
Resident of Lake County

34410

*prepared by:
mildred Dockus*

TICOR TITLE INSURANCE
Crown Point, Indiana

*3.00
EP.
TI*

920000958

25x10

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

Below for State Office Use

- A _____
- B _____
- C _____
- D _____
- E _____
- F _____
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MBALMER'S NAME Marty Andersen
 FUNERAL HOME LICENSE No. 100520
 FUNERAL DIRECTOR'S LICENSE No. 200366
 FUNERAL HOME No. 300125
 FUNERAL DIRECTOR'S SIGNATURE [Signature]

Local No. 819-86

INDIANA STATE BOARD OF HEALTH MEDICAL CERTIFICATE OF DEATH

State No. _____

TYPE OF 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.
 CAUSE

1 DECEASED NAME Bernard Dockus				2 SEX Male		3 DATE OF DEATH MONTH DAY YEAR April 19, 1986	
4 RACE White		5a AGE 78		5b UNDER 1 YEAR MOS. DAYS		5c UNDER 1 DAY HOURS MIN.	
6 DATE OF BIRTH Nov. 17, 1907				7a COUNTY OF DEATH Lake			
7b CITY TOWN OR LOCATION OF DEATH Crown Point				7c HOSPITAL OR OTHER INSTITUTION St. Anthony's Medical Center		7d IF HOSP OR INST indicate DOA Of Inst. Res. Imp. Serv. Inpatient	
8 STATE OF BIRTH Ill.		9 CITIZEN OF WHAT COUNTRY USA		10 MARRIED NEVER MARRIED WIDOWED DIVORCED Married		11 SURVIVING SPOUSE Mildred Huber	
12 SOCIAL SECURITY NUMBER 328-10-8068				13a USUAL OCCUPATION Owner		13b KIND OF BUSINESS OR INDUSTRY Hub Bootery & Barney's Shoes & Boots	
14a RESIDENCE - STATE Indiana		14b COUNTY Lake		14c CITY TOWN OR LOCATION Crown Point			
15a STREET AND NUMBER 506 Orchard Dr.						15b IS RESIDENCE ON A FARM? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
15c INSIDE CITY LIMITS SPECIFY YES OR NO Yes							
16 IS DECEASED OF SPANISH DESCENT? IF YES SPECIFY MEXICAN CUBAN PUERTO RICAN ETC YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>							
17 FATHER NAME George Dockus				18 MOTHER MAIDEN NAME Ursula Janks			
19a INFORMANT NAME Mildred Dockus		19b RELATIONSHIP Wife		20 MAILING ADDRESS 506 Orchard Dr. Crown Point, Ind. 46307			
21a BURIAL CHURCH REMOVAL OTHER Burial				21b CEMETERY OR CREMATORY FUNERAL HOME Calumet Park Cemetery		21c LOCATION Merrillville, Indiana	
22a DATE April 22, 1986				22b FUNERAL HOME NAME AND ADDRESS Geisen Funeral Home, Inc. 109 N. East St. Crown Point, Ind. 46307			
23a To the best of my knowledge death occurred at the time, date and place and due to the cause stated Signature <u>[Signature]</u>				23b DATE SIGNED 4/22/86		23c HOUR OF DEATH 9:30 AM	
24 NAME OF ATTENDING PHYSICIAN P.J. Tara, M.D.							
25 MAILING ADDRESS PHYSICIAN 8127 Merrillville Road Merrillville, Ind. 46410							
26 HEALTH OFFICER'S SIGNATURE <u>[Signature]</u>						26b DATE RECEIVED BY LOCAL HEALTH OFFICER 4-21-86	
27 IMMEDIATE CAUSE Acute Ischemic							
28 PART I (a) DUE TO OR AS A CONSEQUENCE OF							
28 PART I (b) THIS IS DATA FURNISHED BY							
28 PART I (c) OTHER SIGNS AND CONDITIONS							
29 AUTOPSY NO							

EXHIBIT A

LEGAL DESCRIPTION

Part of Lot 16 in the Original Town, now City of Crown Point, as per plat thereof, recorded in Deed Record "B" page 121 and in Plat Book 1 page 46, in the Office of the Recorder of Lake County, Indiana, described as follows:

Commencing 53 feet North of the Southeast corner of said Lot on the West side of Main Street; thence West 105 feet to the alley; thence North 21 feet; thence East 105 feet to the West line of Main Street; thence South 21 feet to the place of beginning.

ALSO a part of Lots 16 and 17 in the original Town, now City of Crown Point, as per plat thereof, recorded in Deed Record "B" page 121 and in Plat Book 1 page 46, in the Office of the Recorder of Lake County, Indiana, described as follows:

Commencing 145 feet South of the Northeast corner of Lot 18; thence South 54 feet; thence West 105 feet to the alley; thence North 54 feet; thence East 105 feet to the place of beginning, except the North 9 feet.

