9

SURVIVORSHIP AFFIDAVIT

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

STATE OF INDIANA)

2000 030007

2000 HAY -3 AM ID: 34

COUNTY OF LAKE

MORRIS W. CARTER RECORDER

On this 23RD day of OCTOBER 1998, before we personally appeared AURORA M. RUBIO who being duly evern on his/her outh states the following:

County, State of Indiana, more particularly described as follows:
THE NORTH 60 FEET OF LOTS 1 AND 2, BLOCK 9, SUBDIVISION OF BLOCKS 3, 4, 9 AND THE NORTH HALF OF BLOCK 10, IN THE NORTHEAST QUARTER OF SECTION 29, TOWNSHIP 37 NORTH, RANGE 9 WEST OF THE 2ND PRINCIPAL MERIDIAN, IN THE CITY OF EAST CHICAGO, AS SHOWN IN PLAT BOOK 5 PAGE 13 IN LAKE COUNTY, INDIANA.

- 2. That said premises were formerly owned as tenants by the entireties by <u>SANTOS M. RUBIO</u> and <u>AURORA M. RUBIO</u> busband and wife.
- 3. That said SANTOS M. RUBIO died on 12-11-94 a resident of Lake County, Indiana, leaving no Will.
- 4. That by reason of the death of SANTOS M. RUBIO, there are no Federal Estate taxes nor Indiana Inheritance Taxes due and payable by reason of the death of said Decedent.
- 5. That on the date of the death of SANTOS M. RUBIO said parties, namely, SANTOS M. RUBIO and AURORA M. RUBIO were humband and vife and have not been divorced.

Further Affiant saith not.

FILED

MAY 0 1 2000

AURORA M. RUBIO

STATE OF INDIANA

PETER BENJAMIN

SAKE COUNTY AUDITOR

MORTHWEST INDIANA TITLE SERVICES, INC.

COUNTY OF LAKE

162 Washington Street Lowell, Indiana 46358 98-7071

Before me, the underwigned, a Notary Public in and for said County and State, this 23RD day of OCTOBER 1998, personally appeared AURORA M. RUBIO and acknowledged the execution of the foregoing affidavit.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my official meal.

My Commission expires: 10/17/06

LINDA S. WOOD Notery Publ

30091

This instrument was prepared by RICHARD A. ZUNICA, Attorney at Law 162 Mashington Street, Lovell, IN 46356

11.00

1
•

lusal.*	94-9	00		C	ERTIFICATE	OF DEA	TH	State	No		
Cai itu	THE RECORD	S IN THIS SERI	· · · · ES ARE CONFID	_		. Or DE	MITI	3(8(0	NO	•••••	• • • • • • • • • • • • • • • • • • • •
YPE/PRINT		AME (First Midd		611111111111111111111111111111111111111	V 10 1 10 2	18	SEX	3a. TIME OF DEA	TH 36 DATE	OF DEATH (Mores De	ly. Yr J
IN		Sant		Rub	io		Male	3:40 a		ember 1	
ERMANENT			Se AGE-LI (Years)	_	Sh UNDER I YEAR	Sc UNDER 1 DA		F BIRTH (Ma. Day. Yr)	7. BIRTHPLAC	E (City and State or	
ILACK INK	453-38		68				Mar	19, 1926			s
	A US VETERAL	Ň7	US. ARMED FOI		OSPITAL TM-seven	mem		HER Nursing Home			
	Yes		1952		☐ ER/Qut	AOO D Inerted		Residence			
CEDENT	96. FACILITY NAM		rine Ho		TUF			LOCATION OF DEATH		NTY OF DEATH	
	10. MARITAL STAT		L SURVIVING SP	DUSE	umenti			ATION (Cive kind of work		Lake	STRY
	(Specify) Marrie	ed //	urora		noz			rator	Inla	nd Stee	1 Co.
	134. RESIDENCE-		36. COUNTY	ne p	a. CITY, TOWN, OR LO		cora	134 STREET AND N			
	India		Lake		East Ch					<u>Street</u>	
	136. ZIP CODE 131 INSIDE CIT		LIMITS 14 CITIZEN OF WHAT COUNTRY				Culson.	ACE-American Indian, Block, White, etc.		17. DECEDENT'S EDUCATION (Specify only highest grade completed)	
	46312	30 ON A FARMT	U.S	,	Memcen. Puerre Rice		' '	(Specify)	Elementary/Sec	endary (0-12) C	ellege (1-4 er 5 +)
	18. FATHER'S NAM	E (France Address of a	-	.A.	Mexica		MOTHER'S NA	White	4		
ENTS	1	Simon	Rubio			"			Mota		
DRMANT	20e. INFORMANT'S				206 MAILING A	DDAESS (Street or		ral Route Number. City or		Code) 20c Relea	onehip
	Auror		Rubio	The state of the s				.Chao, INI	4631	2 Wi	fe
	21a METHOD OF D		2 Entombment		b. DATE AND PLACE O	TTTT			LOCATION-	-City or Town, State	,
		Cremetion (Specify)	Removel from St		A 3 5 1 1 1 1	cember idgelaw			Gary	, India	na
OSITION	224. EMBALMERS			·	226. EMBALMERS LI	CENSE NO		23 WAS DEATH REPOR	TED TO COMONE		
	James		fe		FD0101			₩ No □ Y			
i	244. SIGNATURE OF		CTOR			NSE NUMBER Licensee)	9/	FE FUNER!			3001513
	John	' B' &	rje		FDC	102036					o, IND
ì						1102030	0 74	or/ muchre	PATAG	, ,	
					d the death. Do not enter	THE OWNER OF THE OWNER O	•		. BIVQ.		Approximate
			ert feilure. List only	one cause on ee	d the death Do not enter ch line.	nonepecific terms. (uch se cardec (or respiratory	. BIVG		
	IMMEDIATE CAUSE	rrest, shock, or he	ert feilure. List only	and cause on ea Act va	d the death Do not enter ch line.	Care	uch se cardec (3.BIVQ	-	Approximate Interval Between
SE OF	IMMEDIATE CAUSE disease or condition resulting in death)	rrest, shock, or he (Finel	ert feilure. List only	Act va	d the deeth Do not enter ch line.	Care	uch se cardec (or respiratory	3.BIVG.		Approximate Interval Between
3E OF 'H	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, whites to the immediate	(Final , , ich gave couse.	ert feilure. List only	DUE TO (OR A	the death Do not enter ch tine. CLE AS A CONSEQUENCE CO AS A CONSEQUENCE CO	Caren	uch se cardec (or respiratory	, BIVG		Approximate Interval Between
3E OF IH	IMMEDIATE CAUSE disease or condition resulting in death)	(Final , , ich gave couse.	b c	DUE TO (OR A	d the death Do not enter ch line. CLE AS A CONSEQUENCE C	Caren	uch se cardec (or respiratory	. BIVG		Approximate Interval Between
SE OF TH	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, whiles to the immediate stating the underlying cause last.	rrest, shock, or he (Finel ich gave cause.	bd	DUE TO (OR A	of the death Do not enter the hand. AS A CONSEQUENCE COAS A CONSEQUENCE CO	Caren Caren (F)	we cordec	· Colon			Approximate interval Between Onest and Death
SE OF TH	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, whiles to the immediate stating the underlying cause last.	rrest, shock, or he (Finel ich gave cause.	bd	DUE TO (OR A	the death Do not enter ch tine. CLE AS A CONSEQUENCE CO AS A CONSEQUENCE CO	Carea (F) (F) (F) (F) (F)	B DECEDENT	O DAYS 28a WAS AN PEROPONA	AUTOPEY RD7	29b. WERE AUTOPI	Approximate Interval Between Onest and Death
3E OF	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, whiles to the immediate stating the underlying cause last.	rrest, shock, or he (Finel ich gave cause.	bd	DUE TO (OR A	of the death Do not enter the hand. AS A CONSEQUENCE COAS A CONSEQUENCE CO	Carer OF) OF) PA PA PA PA	B DECEDENT ECONATION OF BETARTUNT	O DAYS 28a WAS AN PERFORM	AUTOPEY ED?	19b. WERE AUTOPI	Approximate Interval Between Onest and Death Death Onest and Death Onest and Death Death Onest and Death Dea
	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, whiles to the immediate stating the underlying cause lest PART II Other significant	(Final (Final ich gave cause.	bd d condmons contribut	OUE TO COR A	of the death Do not enter the hine. CLE AS A CONSEQUENCE CO AS A CONSEQUENCE CO AS A CONSEQUENCE CO AS A CONSEQUENCE CO BUT THE STATE OF THE S	Carer (F) (F) (F) (F) (F)	B DECEDENT ECHANT OR B STPARTUMT B OF RO	O DAYS 28a WAS AN PERFORM (You or M	AUTOPSY ED?	19b. WERE AUTOPI AVAILABLE PR COMPLETION	Approximate Interval Between Onest and Death Death Onest and Death Onest and Death Death Onest and Death Dea
SE OF TH	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, whites to the immediate stating the underlying cause last PART II Other significance of the conference of the conf	(Finel (Finel ich geve cause. cans condenne - C	b. d Condmone contribut	OUE TO COR A DUE TO COR A DUE TO COR A TO TO the best	of the deeth Do not enter the hand. AS A CONSEQUENCE COAS A C	Carea OF) OF) OF) OF) OF) OF) OF) OF	B DECEDENT CONANT OR 9 STPARTUM? 19 or no) MO	O DAYS 28a. WAS AN PERFORM (Year or M NO and due to the cause(s) at	AUTOPEY ED?	29b. WERE AUTOP! AVAILABLE PR COMPLETION (V)	Approximate Interval Between Onest and Death Death Onest and Death Onest and Death Death Onest and Death Dea
	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, who rise to the immediate stating the underlying cause lest PART II Other significance.	(Final (Final (Final ich geve ceuse. Cam condenne - C	b d introduce contribution b d introduce contribution if ying physicial th Officer On	DUE TO (OR A DU	of the death Do not enter the inne. AS A CONSEQUENCE CO AS A CONSEQUENCE CO AS A CONSEQUENCE CO THE INNER THE IN	Carea (F) (F) (F) (F) (F) (F) (F) (F	B DECEDENT EGNANT OR 9 STPARTURY 19 or no) NO date, and place.	O DAYS 28a WAS AN PERFORM (You or M	AUTOPRY ED?	199. WERE AUTOPH AVAILABLE PR COMPLETION OF DEATHT (YO	Approximate Interval Between Onest and Death Death Onest and Death Onest and Death Death Onest and Death Dea
	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, whites to the immediate stating the underlying cause last PART II Other significance of the conference of the conf	(Final CERT CONTROL OF NO. (Final CENT CONTROL OF NO. CERT	b d andmone contribution IFYING PHYSICIAL TH OFFICER On ONER On the bee	DUE TO (OR A DU	of the death Do not enter the inne. AS A CONSEQUENCE CO AS A CONSEQUENCE CO AS A CONSEQUENCE CO THE INNER THE IN	Carea (F) (F) (F) (F) (F) (F) (F) (F	B DECEDENT EQNANT OR 9 STPARTUMY or no) NO date, and place.	O DAYS 28a WAS AN PERFORM (Yee or re NO and due to the cause(s) at the time date, and place.	AUTOPSY ED? I stated. I stated to the caute to the cause(a) ar	199. WERE AUTOPH AVAILABLE PR COMPLETION OF DEATHT (YO	Approximate interval Between Onest and Death Sy FINDINGS HOR TO OF CAUSE HE OF THE OFFICE HE OFFI
	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, whrise to the immediate stating the underlying cause last PART II Other significance (Check only one)	(Final CERT CONTROL OF NO. (Final CENT CONTROL OF NO. CERT	b d andmone contribution IFYING PHYSICIAL TH OFFICER On ONER On the bee	DUE TO (OR A DU	of the death Do not enter the inne. AS A CONSEQUENCE CO AS A CONSEQUENCE CO AS A CONSEQUENCE CO THE INNER THE IN	Carea (F) (F) (F) (F) (F) (F) (F) (F	B DECEDENT EQNANT OR 9 STPARTUMY or no) NO date, and place.	O DAYS 28a. WAS AN PERFORM (Yea or no NO and due to the cause(s) at the time date, and place.	AUTOPSY BD7 I) I stated. and due to the cau- to the cause(a) or VO. 21	19b. WERE AUTOPH AVAILABLE PR COMPLETION (OF DEATH? (You see(a) as stated.	Approximate interval Between Onest and Death Sy FinDings IOR TO OF CAUSE se or nell
IFIER	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, which to the immediate stating the underlying cause lest PART II Other significance (Check only one) 29b SIGNATURE AN 30. NAME AND ADD	(Final CERT COUNTY OF CERT CONTINUE OF CERT CONTINUE OF CERT COUNTY OF CERT COUNT	b	DUE TO (OR A DU	of the deeth Do not enter the inne. AS A CONSEQUENCE CO The transport of the consequence of the co	Carea Carea OF) OF) OF) OF) OF) OF) OF) OF	B DECEDENT CONANT OR 9 STPARTUMT 19 or no) NO data, and place leath occurred at the time	O DAYS 28a. WAS AN PERFORM (Yee or no NC) and due to the cause(s) at the time date, and place, and due 19c. MEDICAL LICENSE (29782	AUTOPEY RD7 I stated. and due to the cause(a) at the cause(a) at VO. 21	TIME WERE AUTOPS AVAILABLE PR COMPLETION (OF DEATH? (Y)) and(a) as sessed. Indicates signed (I) ACCEMBE 2	Approximate interval Between Onest and Death Sy FinDings IOR TO OF CAUSE se or nell
IFIER	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, whrite to the immediate stating the underlying cause last PART II Other significance (Check only one) 29b SIGNATURE AN 30. NAME AND ADD M . Y .	CERT CONDITION OF PERSON ALI, M	b	DUE TO (OR A DU	of the deeth Do not enter the inne. AS A CONSEQUENCE CO The transport of the consequence of the co	Carea Carea OF) OF) OF) OF) OF) OF) OF) OF	B DECEDENT CONANT OR 9 STPARTUMT 19 or no) NO data, and place leath occurred at the time	O DAYS 28a WAS AN PERFORM (You or no NO and due to the cause(s) at the time date, and place. 4. dose, and place, and due the control of the cause(s) at the time date, and place.	AUTOPSY BD7 I stated. Indiduction the cause (a) are vio. 21 2 ana	196. WERE AUTOPH AVAILABLE PR COMPLETION (OF DEATHY (V)	Approximate interval Between Onest and Death Sy Findings and To Or Cause are real. Month Day, Year) C. 12, 19
IFIER	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, which to the immediate stating the underlying cause lest PART II Other significance (Check only one) 29b SIGNATURE AN 30. NAME AND ADD	CERT CONDITION OF PERSON ALI, M	b. d condmone contribut IFYING PHYSICIAL TH OFFICER On ONER On the bee FIRER N WHO COMPLET	DUE TO (OR A DU	of the deeth Do not enter the inne. AS A CONSEQUENCE CO The transport of the consequence of the co	Carea Carea OF) OF) OF) OF) OF) OF) OF) OF	B DECEDENT CONANT OR 9 STPARTUMT 19 or no) NO data, and place leath occurred at the time	O DAYS 28a. WAS AN PERFORM (Yee or no NC) and due to the cause(s) at the time date, and place, and due 19c. MEDICAL LICENSE (29782	AUTOPSY BD7 I stated. Indiduction the cause (a) are vio. 21 2 ana	TIME WERE AUTOPS AVAILABLE PR COMPLETION (OF DEATH? (Y)) and(a) as stated. Indicates a stated.	Approximate interval Between Onest and Death Sy Findings and To Or Cause are real. Month Day, Year) C. 12, 19
IFIER I'H ER	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, whrite to the immediate stating the underlying cause last PART II Other significance (Check only one) 29b SIGNATURE AN 30. NAME AND ADD M . Y .	CERT CONTROL OF PERSON ALI, M	d conditions contributed by the best of th	OUE TO COR A DUE TO COR A DUE TO COR A DUE TO COR A To the best of examination ED CAUSE OF INJURY	of the death Do not enter the time. AS A CONSEQUENCE CO AS A CONSEQUEN	Carea (F) (F) (F) (F) (F) (F) (F) (F	B DECCEPIT ECHANT OR 9 STPARTUMT 19 or no) NO date, and piece. leath occurred at the time.	O DAYS 28a. WAS AN PERFORM (Yee or no NC) and due to the cause(s) at the time date, and place, and due 19c. MEDICAL LICENSE (29782	AUTOPSY ED? I) sected. In date to the cause(a) are the cause(a) are to the cause(b)	200. WERE AUTOPE AVAILABLE PR COMPLETION (OF DEATHY CV) accia) as stated. ad manner as asseed. ad manner as asseed. d. DATE SIGNED (I) accia (I) acc	Approximate interval Between Onest and Death Sy Findings and To Or Cause are real. Month Day, Year) C. 12, 19
IFIER TH ER	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, which to the immediate stating the underlying cause last PART II Other significance (Check only one) 29b SIGNATURE AN 30 NAME AND ADD M Y . 31 HEALTH OFFICER	CERT CONDITION OF PERSON Ali, M	d conditions contributed by the best of th	ONE TO COR A DUE TO COR A DUE TO COR A DUE TO COR A TO the best of examination COR A DUE TO CO	of the death Do not enter the death Consequence of the AS A CONSEQUENCE of the cure of the	Carecosts Carecosts (F) (F) (F) (F) (Y) (Y) (Y) (Y)	B DECCEPIT ECHANT OR 9 STPARTUMT 19 or no) NO date, and piece. leath occurred at the time.	DAYS 28a. WAS AN PERFORM (You or an NC) and due to the cause(s) at the time date, and place, and due the cause and place. 9. date, and place, and due the MEDICAL LICENSE (29782) Ster, Ind	AUTOPSY ED? I) sected. In date to the cause(a) are the cause(a) are to the cause(b)	200. WERE AUTOPE AVAILABLE PR COMPLETION (OF DEATHY CV) accia) as stated. ad manner as asseed. ad manner as asseed. d. DATE SIGNED (I) accia (I) acc	Approximate interval Between Onest and Death Sy Findings and To Or Cause are real. Month Day, Year) C. 12, 19
IFIER TH SER	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, which to the immediate stating the underlying cause last PART II Other significance (Check only one) 29b SIGNATURE AN 30 NAME AND ADD M Y . 31 HEALTH OFFICER	CERT CONTROL OF PERSON ALI, M	b. d condmans contribut IFYING PHYSICIAL TH OFFICER On ONER On the bes	DUE TO (OR / DUE T	of the death Do not enter the ine. AS A CONSEQUENCE CO AS A CONSEQUENC	Caren Caren (F) (F) (F) (F) (Y) (Y) (Y) Courred at the time on in my opinion, deeth occurred at the time on in my opinion, deeth occurred at the time on in my opinion, deeth occurred at the time on in my opinion, deeth occurred at the time of ti	B DECCEPIT EQNANT OR 9 STPARTUM? B or no) NO dote, and piece leath occurred at the bin	DAYS 28a WAS AN PERFORM (You or no	AUTOPSY BD7 I stoted. and due to the cau to the cause(a) or YO. 21 I A 71 A INJURY OCCUP	199. WERE AUTOPH AVAILABLE PR COMPLETION OF DEATHY (V. 1996) as sessed. Mr DATE SIGNED (I. 1996) CEMBE 1 1997 (J.) 1997 (J.) 1997 (J.) 1998 (J.) 1	Approximate interval Between Onest and Death SY FINDINGS IOR TO OF CAUSE see or nell Month Day, Year) C 12,19 sh Day, Year)
IFIER TH CER	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, which to the immediate stating the underlying cause lest PART II Other significations of the control one) 296 CERTIFIER (Check only one) 296 SIGNATURE AND ADD M. Y. 31 HEALTH OFFICER Netural	CERT CONTROL OF NO. (Final Arch gave cause.) CONTROL OF CERT	b. d Condmone contribution IFYING PHYSICIAL TH OFFICER On ONER On the bee TIBLER WHO COMPLET (Adon 34e. PLAC	DUE TO (OR / DUE T	of the death Do not enter the inne. AS A CONSEQUENCE OF AS A CONS	Caren Caren (F) (F) (F) (F) (Y) (Y) (Y) Courred at the time on in my opinion, deeth occurred at the time on in my opinion, deeth occurred at the time on in my opinion, deeth occurred at the time on in my opinion, deeth occurred at the time of ti	B DECCEPIT EQNANT OR 9 STPARTUM? B or no) NO dote, and piece leath occurred at the bin	DAYS 28a. WAS AN PERFORM (You or an NC) and due to the cause(s) at the time date, and place, and due the cause and place. 9. date, and place, and due the MEDICAL LICENSE (29782) Ster, Ind	AUTOPSY BD7 I stoted. and due to the cau to the cause(a) or YO. 21 I A 71 A INJURY OCCUP	199. WERE AUTOPH AVAILABLE PR COMPLETION OF DEATHY (V. 1996) as sessed. Mr DATE SIGNED (I. 1996) CEMBE 1 1997 (J.) 1997 (J.) 1997 (J.) 1998 (J.) 1	Approximate interval Between Onest and Death SY FINDINGS IOR TO OF CAUSE see or nell Month Day, Year) C 12,19 sh Day, Year)
TH CER	IMMEDIATE CAUSE disease or condition resulting in death) Conditions, if any, which to the immediate stating the underlying cause lest PART II Other significations of the control one) 296 CERTIFIER (Check only one) 296 SIGNATURE AND ADD M. Y. 31 HEALTH OFFICER Netural	CERT CONDITION OF THE COURSES OF PERSON Ali, M. T. SIGNATURE Investigation	b. d Condmone contribution IFYING PHYSICIAL TH OFFICER On ONER On the bee TIBLER WHO COMPLET (Adon 34e. PLAC	DUE TO (OR A DU	of the death Do not enter the inne. AS A CONSEQUENCE OF AS A CONS	Caren Caren (F) (F) (F) (F) (Y) (Y) (Y) Courred at the time on in my opinion, deeth occurred at the time on in my opinion, deeth occurred at the time on in my opinion, deeth occurred at the time on in my opinion, deeth occurred at the time of ti	B DECCEPIT EQNANT OR 9 STPARTUM? B or no) NO dote, and piece leath occurred at the bin	DAYS 28a WAS AN PERFORM (You or no	AUTOPSY BD7 I stoted. and due to the cau to the cause(a) or YO. 21 I A 71 A INJURY OCCUP	199. WERE AUTOPH AVAILABLE PR COMPLETION OF DEATHY (V. 1996) as sessed. Mr DATE SIGNED (I. 1996) CEMBE 1 1997 (J.) 1997 (J.) 1997 (J.) 1998 (J.) 1	Approximate interval Between Onest and Death SY FINDINGS IOR TO OF CAUSE see or nell Month Day, Year) C 12,19 sh Day, Year)

14110 001 # 11 JAN 3 .