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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2000 068444

2000 SEP 20 AM 9:20

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

MORRIS W. CARTER
RECORDER

SURVIVOR'S AFFIDAVIT

Linda F. Washington of the County of Lake, State of Indiana, being duly sworn upon her oath, alleges and says that Clarence Washington a/k/a C. C. Washington died intestate, a resident of Lake County, Indiana, on the 18th day of April, 1998; that she was his wife and she lived with him to the day of his death as husband and wife; that to the best of affiant's knowledge, there is no Federal Estate Tax or Indiana State Inheritance Tax due and owing due to his death.

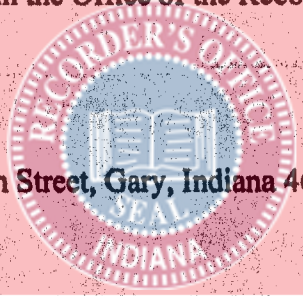
The following described real estate was owned as husband and wife by the entireties at the death of the decedent (Death Certificate attached), and this affidavit is given for purposes of clearing title to said real estate:

Lots 19 and 20 in Block 13 in Addition to Gary Land Company's Eleventh Subdivision, in the City of Gary, as per plat thereof, Recorded in Plat Book 19, page 19, in the Office of the Recorder of Lake County, Indiana.

(Key No. 44-319-19)

(Commonly known as 1045 Harrison Street, Gary, Indiana 46402.)

Further affiant sayeth not.



FILED

SEP 19 2000

PETER BENJAMIN
LAKE COUNTY AUDITOR

Linda F. Washington

LINDA F. WASHINGTON

01146

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13.00
AK

25x

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Subscribed and sworn to before me, a Notary Public for said County and State, this 17th day of
September, 2000.

My Commission Expires:
April 18, 2007



Return to. → This instrument prepared by THOMAS M. DOGAN, ATTORNEY AT LAW.
Bank One Center, Suite 780, 8585 Broadway, Merrillville, Indiana 46410
(219) 769-0100

STATE OF ILLINOIS

STATE FILE NUMBER

REGISTRATION DISTRICT NO. 16.10

MEDICAL CERTIFICATE OF DEATH

606445

DECEASED-NAME FIRST MIDDLE LAST
 1. COUNTY OF DEATH CLARENCE WASHINGTON
 2. SEX MALE
 3. DATE OF DEATH (MONTH, DAY, YEAR) APRIL 18, 1998
 4. COOK
 5a. AGE-LAST BIRTHDAY (YRS) UNDER 1 YEAR UNDER 1 DAY HOURS MIN
 5b. DATE OF BIRTH (MONTH, DAY, YEAR) MARCH 2-1933
 6a. CHICAGO
 6b. VENCOR HOSPITAL, CHICAGO, NORTH
 6c. INPATIENT
 7. MISS
 8a. MARRIED
 8b. SURVIVING SPOUSE (MARRIAGE NAME IF WIFE)
 8c. DECEASED (EVER HAD A WIFE)
 9. WIFE
 10. 728053050
 11. MARIANNE
 12. B
 13a. 1535 GEORGIA STREET
 13b. GARY
 13c. 45
 13d. LAKE
 14a. INDIANA
 14b. BLACK
 15. Arthur WASHNETZKY
 16. MARRIAGE
 17a. LAKEISMA HENRY
 17b. RECORDS
 17c. 2544 WEST MONTROSE AVENUE
 17d. CHICAGO, ILLINOIS 60618
 18. PART I
 19. EMPYEMA
 20. RESPIRATORY FAILURE
 21. 4/18/98
 22. Othman
 23. CHICAGO ILLINOIS 60608
 24. EVERGREEN
 25. DANIEL ZENTANY
 26. APR 20 1998

CITY OF CHICAGO DEPARTMENT OF PUBLIC HEALTH

STATE OF ILLINOIS COUNTY OF COOK CITY OF CHICAGO APR 20 1998 L SHEILA LYNE, TISM, LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILLBIRTHS AND DEATHS FOR THE CITY OF CHICAGO BY VIRTUE OF THE LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO, THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY OF A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES.



01147

(THIS CERTIFIED COPY VALID WHEN THE LOCAL OR SIGNATURE SEAL IS AFFIXED.)

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