

STATE OF INDIANA )  
 )  
COUNTY OF LAKE )

SS: IN RE: HARVEY WHITE, Decedent

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

AFFIDAVIT FOR TRANSFER OF REAL PROPERTY

Gussie Caldwell having been first duly sworn upon her oath states:

1. That Harvey White the above- named decedent died intestate on October 12, 1985, while domiciled in Lake County, Indiana. A copy of the Death Certificate is attached to this Affidavit as Exhibit "A".

2. That forty-five (45) days have elapsed since the death of the decedent.

3. That no application or petition for the appointment of a personal representative is pending or has been granted in any jurisdiction nor is any administration contemplated.

4. That the following named persons are the sole heirs of the decedent's estate:  
**Gussie Caldwell, 2167 East 97th Street, Chicago, IL 60617, sister-in-law**

5. That the person named above is the sister-in-law of the decedent and therefore entitled to share in decedent's estate.

6. That it appears that the decedents' gross probate estate, less liens and encumbrances, does not exceed the sum of the following:

**Twenty-Five Thousand Dollars (\$25,000.00)**

7. That among the decedent's probate assets is a parcel of real estate which was owned by the decedent located in Lake County, Indiana, more particularly described as follows:

**Gary Investment Co's 1st Sub. All Lot 1 Block 6**

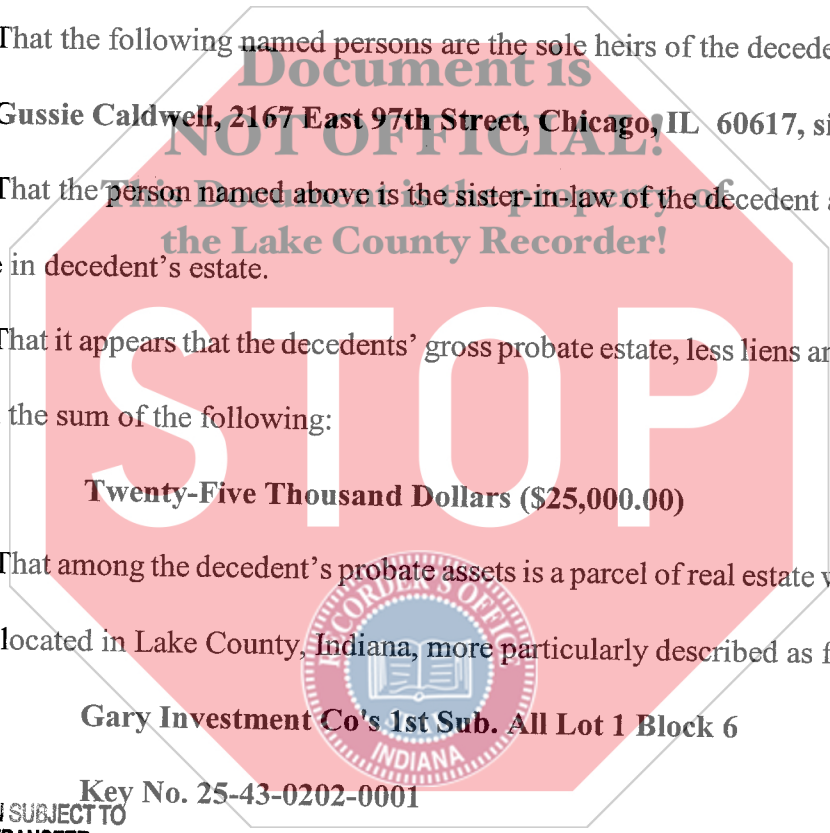
**Key No. 25-43-0202-0001**

**Commonly known as: 1900 Virginia Street  
Gary, Indiana 46407**

DULY ENTERED FOR TAXATION SUBJECT TO  
FINAL ACCEPTANCE FOR TRANSFER

JUN 29 2005

STEPHEN R. STIGLICH  
LAKE COUNTY AUDITOR



2005 054212

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
MICHAEL A. BROWN  
RECORDER  
2005 JUN 30 11:16 AM

002424

Handwritten signature and date: 14-17 CR 2675

8. That there are no known creditors of the estate and no claims have been made against the decedents' estate.

9. That the individual entitled to the real estate as a result of the decedent's death is:

**Gussie Caldwell, sister-in-law**

10. That the gross value of the estate of the decedent, Harvey White as determined for the purposes of Federal Estate taxes, was less than the value required for the filing of a Federal Estate Tax Return. As a consequence thereof, the decedents' estate was not subject to Federal Estate Tax.

11. That the decedent's estate was not subject to Indiana Inheritance Tax.

**AFFIANTS FURTHER SAITH NOT**

Gussie Caldwell  
GUSSIE CALDWELL

**Document is NOT OFFICIAL!**

**This Document is the property of the Lake County Recorder!**

STATE OF ILLINOIS )

) SS:

COUNTY OF COOK )

Subscribed and sworn to before me, a Notary Public in and for said County and State, on

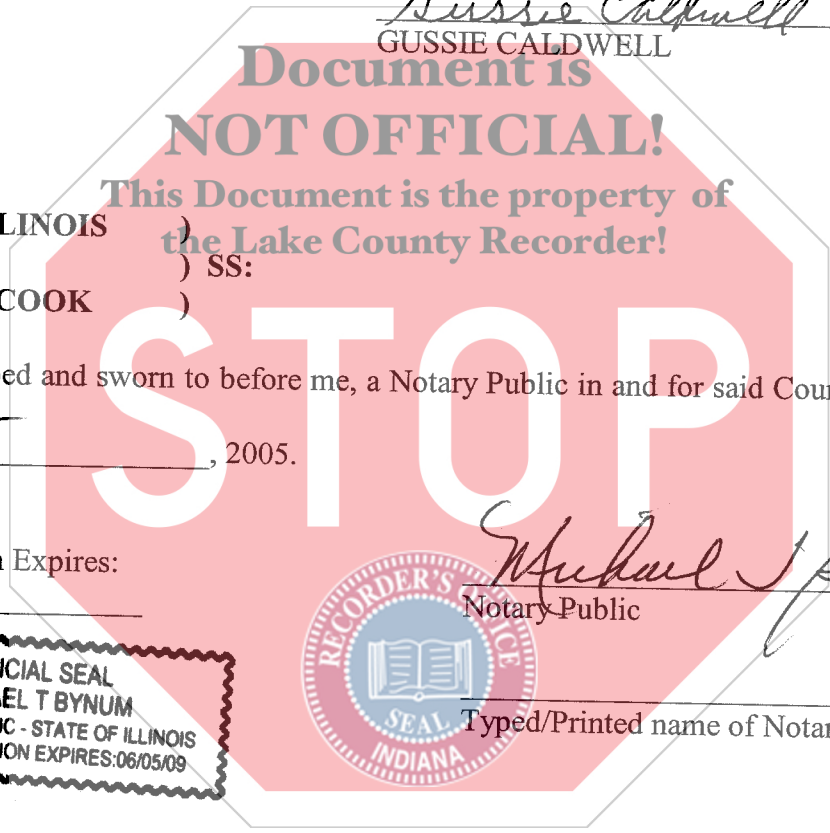
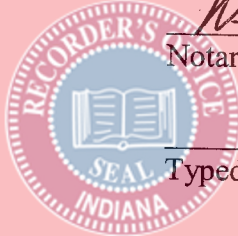
6-15, 2005.

My Commission Expires:

Michael J Bynum  
Notary Public

Typed/Printed name of Notary Public

OFFICIAL SEAL  
MICHAEL T BYNUM  
NOTARY PUBLIC - STATE OF ILLINOIS  
MY COMMISSION EXPIRES: 06/05/09



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

Below for State Office Use

- A \_\_\_\_\_
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EMBALMER'S NAME Roosevelt Allen LICENSE No. 5170  
 FUNERAL DIRECTOR'S SIGNATURE Patsy L. Allen FUNERAL DIRECTOR'S LICENSE No. 659 FUNERAL HOME No. 770

Local No. 1979-85

INDIANA STATE BOARD OF HEALTH  
MEDICAL CERTIFICATE OF DEATH

State No. \_\_\_\_\_

DECEASED		FATHER - NAME		MOTHER - NAME		BIRTH DATE		BIRTH PLACE		BIRTH RECORD		MARRIAGE RECORD		MARRIAGE DATE		MARRIAGE PLACE		MARRIAGE RECORD	
HARVEY		ALBERT		WHITE		10-5-1914		Lake		Mae Bell Collier		10-12-1985		Lake		U.S. Steel		Yes	
RACE		SEX		CITIZENSHIP		MARRIAGE STATUS		OCCUPATION		RESIDENCE		CITY/TOWN		CITY/TOWN		CITY/TOWN		CITY/TOWN	
Bik		M		U.S.A.		Married		Retired		In.		Gary		Gary		U.S. Steel		Yes	
CITY/TOWN OF DEATH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH	
Merriville		Merriville		U.S.A.		Merriville		Merriville		Merriville		Merriville		Merriville		Merriville		Merriville	
STATE OF BIRTH		CITIZENSHIP		MARRIAGE STATUS		OCCUPATION		RESIDENCE		CITY/TOWN		CITY/TOWN		CITY/TOWN		CITY/TOWN		CITY/TOWN	
Texas		U.S.A.		Married		Retired		In.		Gary		U.S. Steel		U.S. Steel		U.S. Steel		U.S. Steel	
SOCIAL SECURITY NUMBER		RESIDENCE - STATE		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH	
32-05-0798		In.		Lake		Gary		U.S. Steel		U.S. Steel		U.S. Steel		U.S. Steel		U.S. Steel		U.S. Steel	
STREET AND NUMBER		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH		CITY/TOWN OF BIRTH	
14 1900 Virginia St.		Merriville		Merriville		Merriville		Merriville		Merriville		Merriville		Merriville		Merriville		Merriville	
DATE OF DEATH		PLACE OF DEATH		CAUSE OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH	
10-16-1985		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal	
DATE OF DEATH		PLACE OF DEATH		CAUSE OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH	
10-16-1985		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal	
NAME OF DECEASED		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP	
Mae Bell White		White		White		White		White		White		White		White		White		White	
1900 Virginia St.		1900 Virginia St.		1900 Virginia St.		1900 Virginia St.		1900 Virginia St.		1900 Virginia St.		1900 Virginia St.		1900 Virginia St.		1900 Virginia St.		1900 Virginia St.	
BURLAL, REMOVAL, OTHER		BURLAL, REMOVAL, OTHER		BURLAL, REMOVAL, OTHER		BURLAL, REMOVAL, OTHER		BURLAL, REMOVAL, OTHER		BURLAL, REMOVAL, OTHER		BURLAL, REMOVAL, OTHER		BURLAL, REMOVAL, OTHER		BURLAL, REMOVAL, OTHER		BURLAL, REMOVAL, OTHER	
Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal	
DATE OF DEATH		PLACE OF DEATH		CAUSE OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH		MANNER OF DEATH	
10-16-1985		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal		Burlal	
NAME OF DECEASED		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP	
Ernest M. Allen		White		White		White		White		White		White		White		White		White	
9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway	
9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway	
HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE	
Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen	
DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE	
10-21-85		10-21-85		10-21-85		10-21-85		10-21-85		10-21-85		10-21-85		10-21-85		10-21-85		10-21-85	
NAME OF DECEASED		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP		RELATIONSHIP	
Robert L. Allen		White		White		White		White		White		White		White		White		White	
9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway		9001 Broadway	
HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE		HEALTH OFFICER - SIGNATURE	
Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen		Roosevelt Allen	
DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE		DATE RECEIVED BY LOCAL HEALTH OFFICE	
10-21-85		10-21-85		10-21-85		10-21-85		10-21-85		10-21-85		10-21-85		10-21-85		10-21-85		10-21-85	

SBH 06-003 STATE FORM 35430  
REV 10/77

