



Chicago Title Insurance Company

SURVIVORSHIP AFFIDAVIT

BY 60078

2006 015813

On this 2/14/2006 before me personally appeared _____
(insert date) SIMONETTE GALLO

to me personally known, who being duly sworn on oath did say that:

1. Affiant resides at the address given below affiant's signature:

2. Affiant is GREAT NIECE
state interest of affiant in the above premises as "owner", "son of owner", etc.

3. Said premises were formerly owned as joint tenants or as tenants by the
entireties by GEORGE L. DALLIS and CHRISANTHE DALLIS

4. Said GEORGE L. DALLIS
(fill in name of co-tenant who died)
died on 7-09-1986

leaving NO will;
insert "a" or "no"; if will left, attach a copy

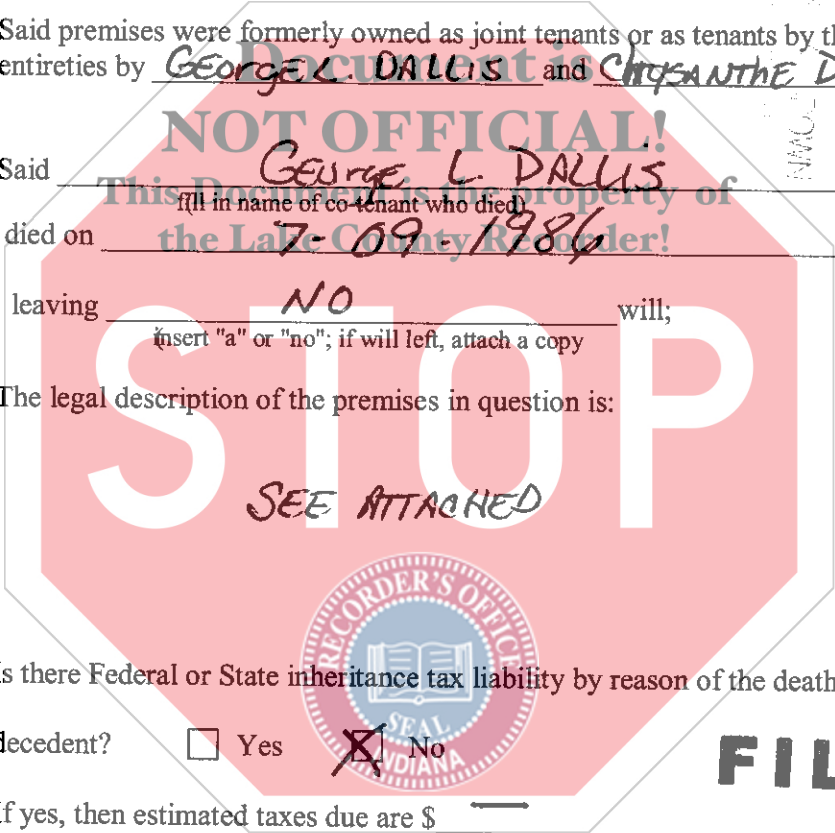
5. The legal description of the premises in question is:

SEE ATTACHED

6. Is there Federal or State inheritance tax liability by reason of the death of said
decedent? Yes No

If yes, then estimated taxes due are \$ _____

The taxes due are paid or unpaid.



2006 FEB 28 PM 10:08
FILED FOR RECORD
LAKE COUNTY RECORDER
TOWN

FILED

FEB 27 2006

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

\$14
CT
CA

004076

7. Where this affidavit relates to a tenancy by the entireties, were the parties ever divorced? NO

(If answer is "Yes" , identify the divorce proceedings:

_____):

8. Affiant's relationship to the deceased was GRAND NIECE

Signature: Simonette Gallo "PR"

Printed Name Simonette Gallo "PR"

Address: 1008 Taft place
Merrillville IN 46410

Subscribed and sworn to before me by the affiant

This 2/14/06
(insert date)

[Signature]
Notary Public

Printed Name KEDIN J ZAMBORA

My County of Residence is: LAKE

In the State of IN

My Commission Expires 12/09/07

This instrument prepared by SIMONETTE GALLO



DECLARATION

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do hereby affirm under penalties of perjury:

1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security numbers;
2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, the undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.

