018510

TICOR TITLE INSURANCE

AFFIDAVIT

STATE OF INDIANA)	
) SS:	3 20
COUNTY OF LAKE)	
Beverly J. Ewing	, being first duty
Sworn upon oath, deposes and says:	, being first duly
1. That Robert Lee Ewing	
died on August 19 0 2007 e at 18:2	7 AM
2. That Beverly J. Ewing T and Robert Le	ee Ewing
were duly and legally married at the time they acquired title	as husband and wife
to the following described real estate: Lot 15 in Spring Dale Addition, in the City of H	and
Lot 15 in Spring Dale Addition, in the City of H	Hobart, as per plat
thereof, recorded in Plat Book 33, page 11, in t Recorder of Lake County, Indiana.	the Office of the
45-09-32-452-012.666-018	
3. That the marital relationship which existed between them	at the time they acquired
title to said real estate remained in effect and unbroken until	
THE THE PARTY OF T	
4. That all funeral expenses in connection with the death of paid in full.	said decedent have been
paid in run.	
5. That all of the assets of said decedent which would be inc	cludable for Federal Estate
tax purposes, including joint bank accounts and life insurance	ce on decedent's life were
Not sufficient to necessitate payment of Federal Estate Tax.	
Further affiant sayeth not. FILED	1
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NOV 1 9 2008 See	wely During
	erly Ewing (/
PEGGY HOLINGA AUDITOR Subscribed and sworn to ANSFORM THE, a Notary Public, this	23rd day of
October , 2008 .	day 61
10	$\gamma_{\mathcal{M}}$ γ .
STACI MARIE FINCH Lake County	Manistral
My Commission Expires Feb. 20, 2016 Notary I	Public: staci Marie Finch
2/20/16	
wiy commission expires.	
County of Residence: rea	affirm, under the penalties for perjury, that I have taken asonable care to redact each Social Security number in a document, unless required by law." Chris Burk
<u></u>	
This Instrument prepared by:Beverly J. Ewing	
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*ATTENTION ESTATE: The Social Security # is being requested by this state agency in order to pursue its statulory responsibility. Disclosure is voluntary and there will be no penalty for refusal.

Local No.

CERTIFICATE OF DEATH

CERTIFICATE OF DEATH**

State No.

DENT HUMBER AME IF NOT MISE THE STREET 131 INSIDE C. D NO.	ROBERT LEE E Se ACE—Last Beroday (Yours) 73 An YEAR LAST SERVED IN U.S. ARMED FONCES! 1957 SETURGINA (PART BERODAY) BET SURVIVING SPOUSE (F WAR, GIVE READEN ARME) BEVERLY ETROPY 136 COUNTY Lake CITY LUARTS N YOU WHAT COUNTRY LASKE CITY LUARTS U.S. A. U.S. A. O'VER COMPANY U.S. A. PARPOPER OF CORRESPONDENCES OF CONTRY OF COUNTRY PARPOPER OF CONTRY O	So. UNDER 1 YEAR MORPH DOYN MORPH DOYN HOSPITAL Input ISC. CITY, TOWN, OR HOBART IS WAS DECEDENT S No. CI MARKET AREA 20b. MAILEN 1013 E. 21b. DATE AND PLACE other place) Kelly-Carro 22b. EMBALMERS FD010064	Hours Menters Outpresent Doo Fig. December Doo Pipe Fitte LOCATION OF HISPANIC OFF Yes III yes specific to get to g	Sa PLAC Sa PLAC COLY, TOWN, Hobart Sustan Cocc most of working er 19. MOTHERS P Anna Ihr st and Number of Hobart, N. (Mane of comm.) 17. Ref. (60)	Real Rose Number, Cay of IN 46342 IN 46342 Iny, cronstory, or 23. WAS DEATH REPC No R IMME ADDRESS, AND LI es Funeral Ho) W. Old Ridg	I Aug 7. BATHER Gary India One Ser Market 120. Kin Lak MA 120. Kin Loca MANAGER 1 Street 1 Street 1 Carry 1 12 MANAGER Gary IN MATED TO CORN Ves CEMSE NUMBER INC. Inc.	OUNTY OF DEATH LE TO OF BUSINESS/M 11 #597 17. DECEDENT'S I DOVERY ONLY Repress ((Secondary (0.12) The Codel 20c R WIT DN—City or Town S ONER* TO FUNERAL HOL FILESO03	7 s or Foreign County NDUSTRY EDUCATION prode contableod College (1-A or 3
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