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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2009 080390

2009 DEC -3 PM 3:57

MICHAEL A. BROWN
RECORDER

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

SURVIVORSHIP AFFIDAVIT

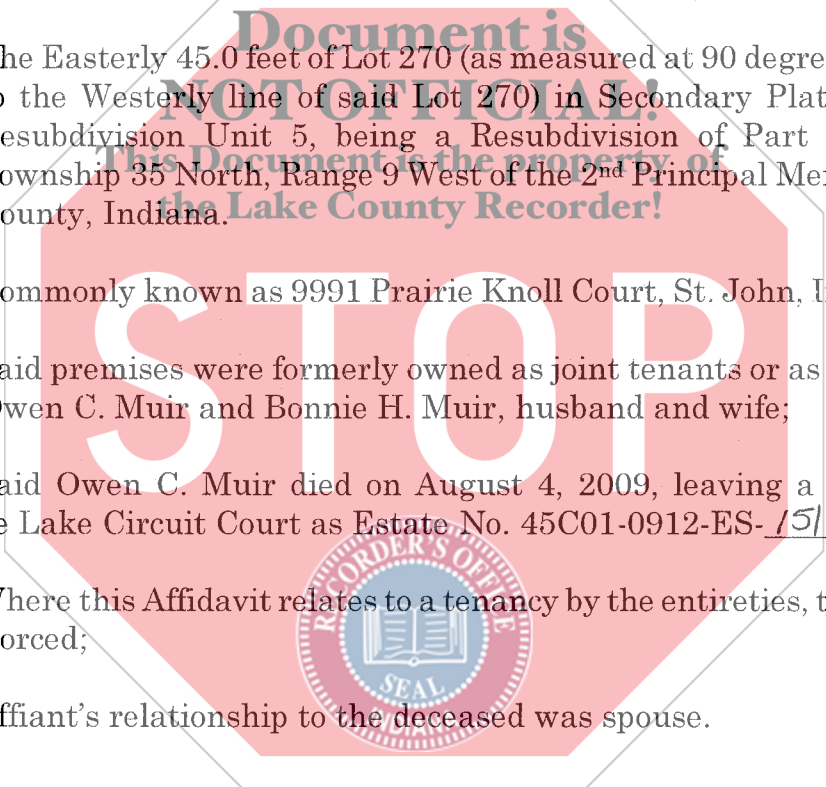
On this 3rd day of December, 2009, before me personally appeared Bonnie H. Muir, who being duly sworn upon her oath states:

- 1. Affiant resides at the address given below the affiant's signature;
- 2. Affiant is the surviving joint owner of the real estate described below;
- 3. Said premises are described below as follows:

The Easterly 45.0 feet of Lot 270 (as measured at 90 degrees and parallel to the Westerly line of said Lot 270) in Secondary Plat of Lake Hills Resubdivision Unit 5, being a Resubdivision of Part of Section 28, Township 35 North, Range 9 West of the 2nd Principal Meridian, in Lake County, Indiana.

Commonly known as 9991 Prairie Knoll Court, St. John, Indiana 46373.

- 4. Said premises were formerly owned as joint tenants or as tenants by the entireties by Owen C. Muir and Bonnie H. Muir, husband and wife;
- 5. Said Owen C. Muir died on August 4, 2009, leaving a Will, which is probated in the Lake Circuit Court as Estate No. 45C01-0912-ES-151;
- 6. Where this Affidavit relates to a tenancy by the entireties, that the parties were never divorced;
- 7. Affiant's relationship to the deceased was spouse.



FILED

DEC 03 2009

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

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CKH 15872

14256A

Affiant's Signature Bonnie H. Muir

Name Printed Bonnie H. Muir

Address 9991 Prairie Knoll Court
St. John, IN 46373

Subscribed and sworn to before me, a Notary Public, this 3rd day of December, 2009.

Benjamin T. Ballou
Benjamin T. Ballou, Notary Public
A Resident of Lake County

My Commission Expires:
November 21, 2015

Document is NOT OFFICIAL!

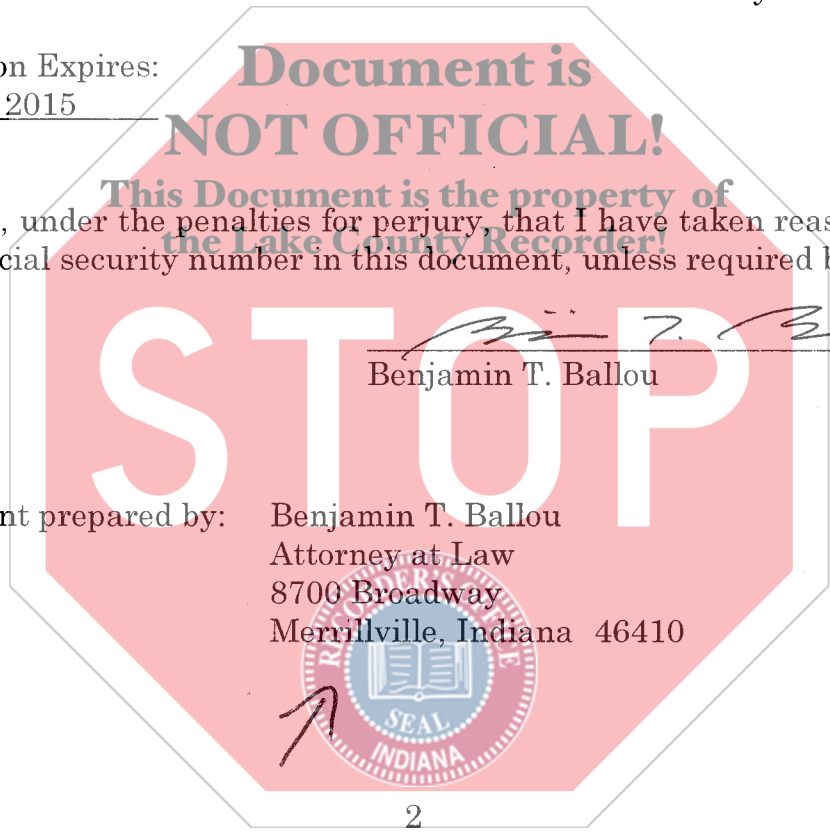
This Document is the property of the Lake County Recorder!

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each social security number in this document, unless required by law.

Benjamin T. Ballou
Benjamin T. Ballou

This instrument prepared by: Benjamin T. Ballou
Attorney at Law
8700 Broadway
Merrillville, Indiana 46410

64544.2
17,638





INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

Local No. 2863-09

State No.

Form containing fields for decedent information (OWEN CHARLES MUIR), birth details (January 23, 1939), cause of death (Septic Shock), and certifier information (SHELDON LEWIS MD).