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Survivorship Affidavit

2011 026363

State of: Indiana)
) SS:
County of: Lake

On this 5th Day of May, 2011 before me personally appeared Dennis Slivka, who being duly sworn on oath did say that:

1. Affiant resides at 2601 Boca Raton Drive, Valparaiso, Indiana 46383
2. Affiant is Dennis Slivka, the Son of Andrew J. Slivka
(state interest of affiant in the above premises as owner)
3. Said premises described as follows:

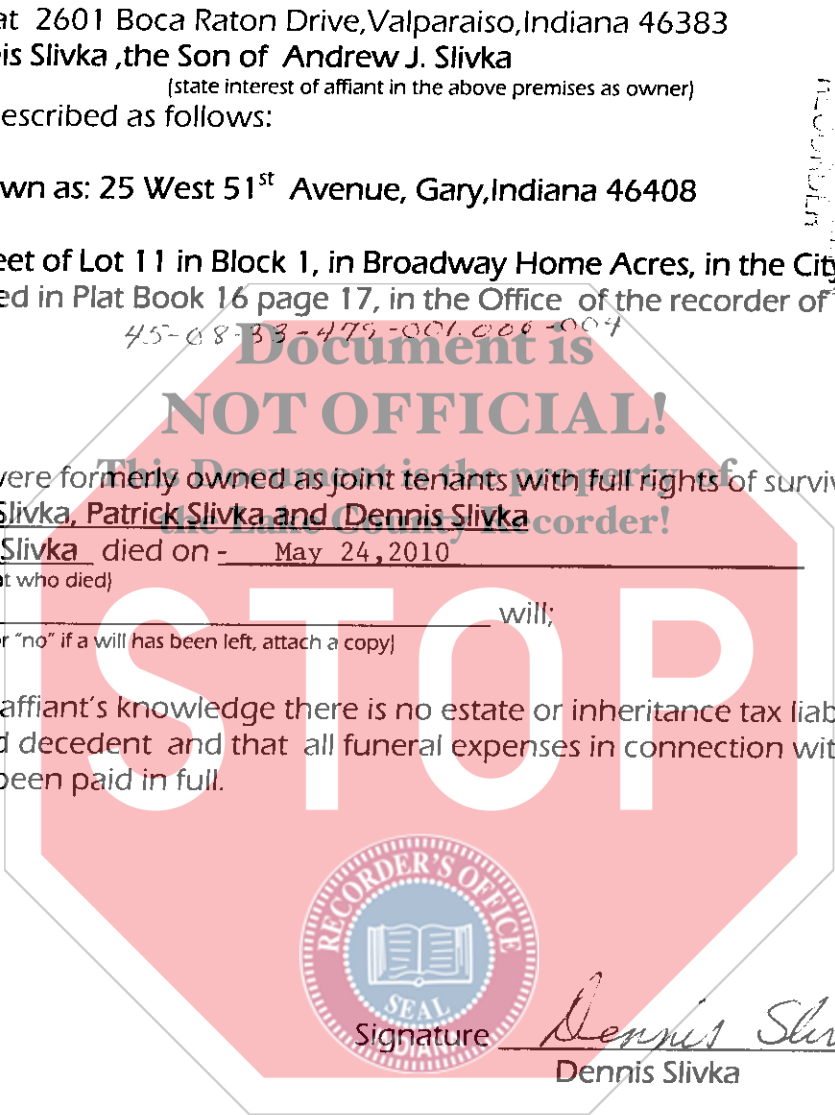
Commonly known as: 25 West 51st Avenue, Gary, Indiana 46408

The North 70 feet of Lot 11 in Block 1, in Broadway Home Acres, in the City of Gary, as per plat thereof, recorded in Plat Book 16 page 17, in the Office of the recorder of Lake County, In.

45-08-33-475-001.000-004

Document is NOT OFFICIAL!

4. Said premises were formerly owned as joint tenants with full rights of survivorship by Andrew J. Slivka, Patrick Slivka and Dennis Slivka
5. Said Andrew J. Slivka died on - May 24, 2010
(fill in name of co-tenant who died)
leaving no will;
(insert "a" or "no" if a will has been left, attach a copy)
6. To the best of affiant's knowledge there is no estate or inheritance tax liability by reason of the death of the said decedent and that all funeral expenses in connection with the death of said decedent have been paid in full.



2011 MAY 11 AM 9:33
 FILED
 RECORDER'S OFFICE
 LAKE COUNTY, INDIANA

State of Indiana)
)
County of Lake)

Before me, the undersigned, a Notary Public in and for said County and State, this 5th of May, 2011 personally appeared Dennis Slivka acknowledged the execution of the foregoing Affidavit.

Paula Barrick
Notary Public: Paula Barrick
Resident of Lake County
Commission expires: 10-02-17

FIDELITY MO
920110463

INDIANA PUBLIC SEAL
 PAULA BARRICK
 Lake County
 My Commission Expires
 Oct. 2, 2017

Prepared by: Dennis Slivka

FILED

"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." Chris Burk

MAY 10 2011

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

AMOUNT \$ 14
 CASH _____ CHARGE FN
 CHECK # _____
 OVERAGE _____
 COPY _____
 NON-COM _____
 CLERK MS

052671

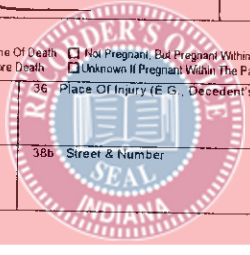
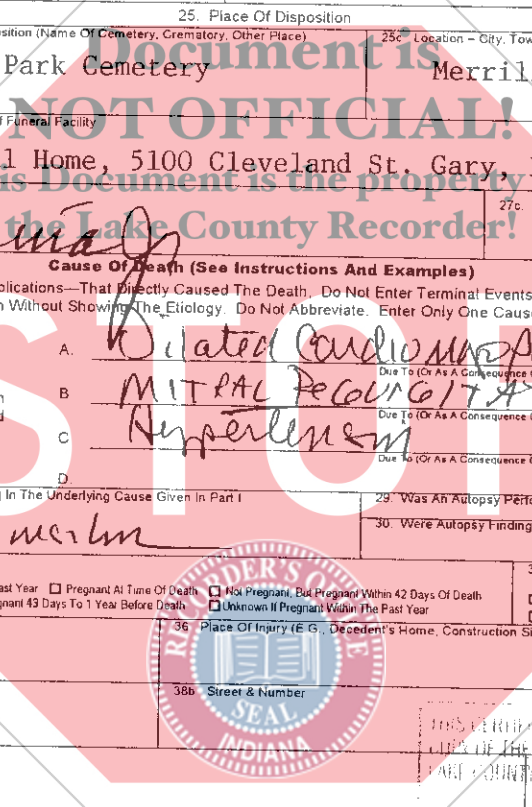


INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

Local No. 1641-10 resub

State No.

Form containing fields for decedent's name (ANDREW J. SLIVKA), sex (Male), date of death (May 24, 2010), birth date (June 8, 1921), place of birth (Mingo Jct., Ohio), residence (Gary, Indiana), cause of death (Dilated Cardiomyopathy, Mitral Regurgitation, Hypertension), and certifier information (William H. Pence, MD).



THIS CERTIFICATE ABOVE IS A TRUE AND COMPLETE COPY OF THE CERTIFICATE OF DEATH ON FILE WITH THE LAKE COUNTY HEALTH DEPARTMENT