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STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2011 044475

2011 AUG 18 AM 10:15

AFFIDAVIT OF SURVIVORSHIP

MICHAEL J. SWAN
RECORDER

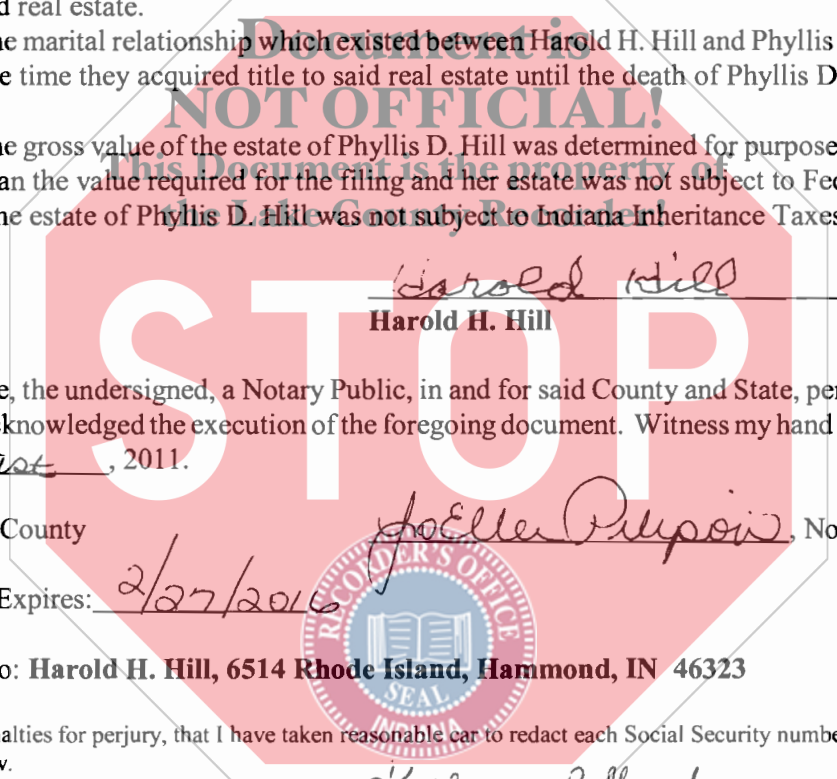
Comes now **Harold H. Hill**, being duly sworn upon his oath and states as follows:

1. That he is competent and has personal knowledge of the facts contained herein.
2. That at the time of her death, **Phyllis D. Hill**, was the owner in fee simple of the following described real estate located at 6514 Rhode Island, Hammond, Lake County, Indiana, and more particularly described as follows:

Lot 4, Block 15, Cline Gardens Addition to the City of Hammond, Indiana, as per plat thereof, recorded in Plat Book 31, Page 71, in the office of the Recorder of Lake County, Indiana.

**Commonly known a 6514 Rhode Island, Hammond, IN 46323
Parcel No.: 45-07-10-227-029.000-023**

3. That Harold H. Hill and Phyllis D. Hill were husband and wife and acquired title as tenants by the entirety to said real estate.
4. That the marital relationship which existed between Harold H. Hill and Phyllis D. Hill continued unbroken from the time they acquired title to said real estate until the death of Phyllis D. Hill on May 21, 2011.
5. That the gross value of the estate of Phyllis D. Hill was determined for purpose of Federal Estate Taxes was less than the value required for the filing and her estate was not subject to Federal Estate Tax.
6. That the estate of Phyllis D. Hill was not subject to Indiana Inheritance Taxes.



Harold Hill
Harold H. Hill

Before me, the undersigned, a Notary Public, in and for said County and State, personally appeared Harold Hill and acknowledged the execution of the foregoing document. Witness my hand and seal this 4 day of August, 2011.

Resident of Lake County Joelle Puyois, Notary Public

My Commission Expires: 2/27/2016

Mail tax notices to: **Harold H. Hill, 6514 Rhode Island, Hammond, IN 46323**

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.

Kathryn S. Shudzer

FILED

054885

AUG 17 2011

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

AMOUNT \$ 14
 CASH _____ CHARGE _____
 CHECK # 2140
 OVERAGE _____
 COPY _____
 NON - COM
 CLERK Aut

KE



INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

Local No 001578

EDR No 000000200339

State No 022509

Form containing fields for decedent information (Phyllis D Hill), social security number (315-30-7999), date of birth (09/15/1933), place of death (Lake County, Hammond), cause of death (Non-small cell lung cancer metastatic), and certifying physician (Mark Francis Kevin).