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2012 JUN 21 AM 9:27

MICHAEL J. JIMIAN
RECORDER

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

SUPPLEMENTAL SURVIVORSHIP AFFIDAVIT

On this 5th day of June, 2012, BEVERLY J. WINGFIELD, "Affiant," being duly sworn upon her oath states that:

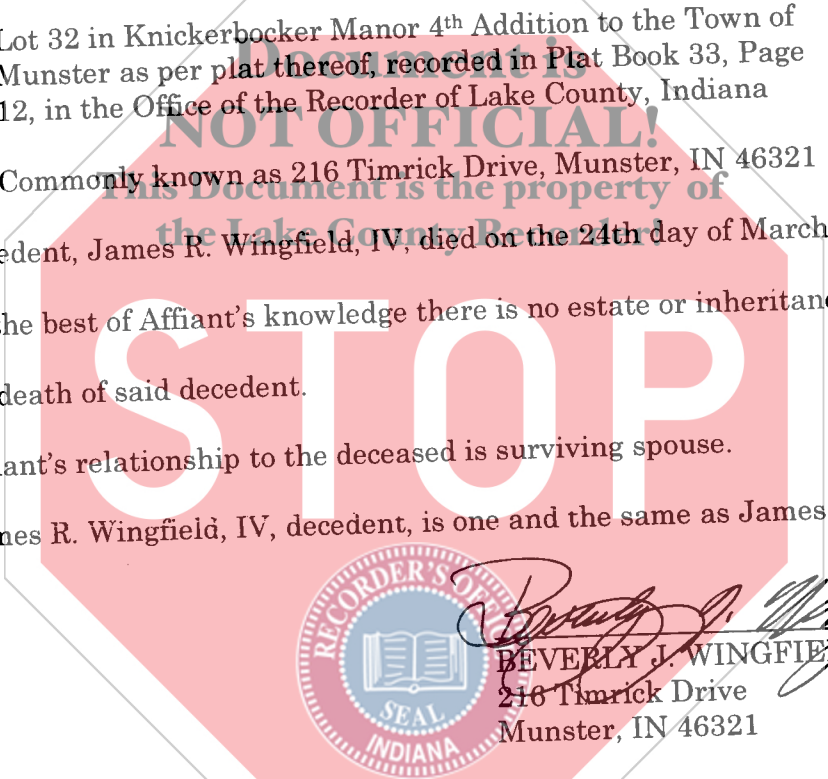
1. Affiant resides at the address given below affiant's signature.
2. The following real estate was formerly owned by James R. Wingfield and Affiant,

Beverly J. Wingfield, husband and wife, as joint tenants:

Lot 32 in Knickerbocker Manor 4th Addition to the Town of Munster as per plat thereof, recorded in Plat Book 33, Page 12, in the Office of the Recorder of Lake County, Indiana

Commonly known as 216 Timrick Drive, Munster, IN 46321

4. Decedent, James R. Wingfield, IV, died on the 24th day of March, 2008.
5. To the best of Affiant's knowledge there is no estate or inheritance tax liability by reason of the death of said decedent.
6. Affiant's relationship to the deceased is surviving spouse.
7. James R. Wingfield, IV, decedent, is one and the same as James R. Wingfield

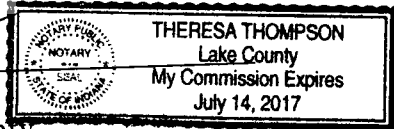


Beverly J. Wingfield
BEVERLY J. WINGFIELD
216 Timrick Drive
Munster, IN 46321



SUBSCRIBED AND SWORN to before me, a Notary Public in and for said County and State this 5th day of June, 2012.

Theresa Thompson
NOTARY PUBLIC
Resident of Lake County



My Commission Expires: _____

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.

[Signature]

This document prepared by: ADAM J. SEDIA - #28775-45
RUBINO, RUMAN, CROSMER & POLEN
27 ~~1~~ 1/2 ~~1~~ Street, Suite 330
Dyer, IN 46311 219-322-8222

FILED

JUN 18 2012

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

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INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

City Of East Chicago
East Chicago, In 46312

134843

Local No. 000081

State No.

Form containing fields for decedent information (James R. Wingfield, IV), birth details (August 6, 1952), death details (March 24, 2008), medical history, cause of death (Crushing injuries of pelvis), and certifier information (Donna Melyon).

