

2012 041007

2012 JUN 21 AM 9: 53

SURVIVORSHIP AFFIDAVIT MICHER FAIMAN
2019128PW(IM)
On JUNE 4. 2012 before me personally appeared
to me personally known, who being duly sworn on oath did say that:
 Affiant resides at the address give below affiant's signature; Affiant is OWNER
(state interest of affiant in the above premises as "owner", "son of owner", etc) 3. Said premises were formerly owned as joint tenants or as tenants by the entireties by Kenneth A. HARDIN and Betty HARDIN;
4. Said <u>Betty Manpin</u> (complete name of deceased co-tenant)
died on JANUARY 29, 2011 leaving N6 will; insert "a" or "no" if will, attach a copy
5. The legal description of the premises in question is:
LOT 65, IN the PANK SECOND ADDITION TO the TOWN of GRIFFITH, AS DEN PLAT Thereof, Recorded in PLAT BOOK 37, Dage 6, IN the Office of the Recorder of LAKE COUNTY, IN.
6. Is there Federal Estate or State inheritance tax liability by reason of the death of said decedent? ☐ Yes ☐ No If yes, then estimated taxes due are \$ The taxes due are ☐ paid or ☐ unpaid.
7. Where this affidavit relates to a tenancy by the entireties, were the parties ever divorced? Yes No If yes, identify the divorce proceedings:
8. Affiant's relationship to the deceased was SPOWSE
Signature: Kenneth A. HARDIN
Address: 520 EAST 40 # PLace
Subscribed and sworn to before me by the affiant on Sun 4,2012, before me Cincilian Bullingly a Notary Public
My County of Residence is: Take In the State of Ondiana My Commission Expires: April 13, 2011
This instrument prepared by Angeline Budzevski
Official Seal ANGELINE BUDZEVSKI Resident of Lake County, IN
PEGGY HOLINGA KATONA PEGGY HOLINGA KATONA PEGGY HOLINGY AUDITORI
PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR
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ISSUED BY MARION COUNTY HEALTH DEPARTMENT

INDIANA STATE DEPARTMENT OF HEALTH CERTIFICATE OF DEATH

Local No OOC	640	ED	R No 0000	001804	<u>50 </u>	Z Bex	State	NO Time O/D	eets	4. Date O	Desth (Month/Day/Ya
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