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STATE OF INDIAN LAKE COUNT FILED FOR RECORE

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MICHAEL OLL & RECORDER

SURVIVORSHIP AFFIDAVIT STATE OF INDIANA SS: COUNTY OF LAKE We, Terry L. DeYoung and Evelyn M. Kijewski, being first duly sworn states that: Affiants are the owners of the following described real estate: The North Half of Lot 168, in Prairie View, Unit 3, an Addition to the City of Crown Point, as per plat thereof, recorded in Plat Book 88, page 59, and amended by a Certificate of Correction recorded November 5, 2001, as Document No. 2001 089141, in the Office of the Recorder of Lake County, Indiana. More commonly known as: 249 S Heather Lane, Crown Point, IN 46307 Parcel No.: 45-16-09-251-007.000-042 Said premises were formerly owned as Thelma J. Balaszek, Terry L. DeYoung and Evelyn M. Kijewski, as joint tenants with rights of survivorship; Said Thelma J. Balaszek died a resident of Lake County, Indiana, on the 18th day of September 2012; attached as Exhibit A is a copy of the Certificate of Death of Thelma J. Balaszek; The above-described real estate is not subject to inheritance tax liability or federal estate tax liability; 4. the Lake County Recorder 5. The Affiants make this Affidavit to confirm that ownership in the above-described real estate is now vested in the Affiants, Terry L. DeYoung and Evelyn M. Kijewski, as joint tenants with rights of survivorship, and to induce the Auditor of Lake County to reflect the correct ownership of such real estate on said Auditor's records. day of March, 2013 Evelvn M. Kijewski Before me, the undersigned, a Notary Public in and for said County and State, this day of March, 2013, personally appeared Terry L. DeYoung and Evelyn M. Kijewski, and acknowledged the execution of the foregoing Survivorship Affidavit. In witness whereof, I have hereunto subscribed my name and affixed my official seal. Lori L. Cassoday, Notary Public LORI L. CASSODAY tary Public, State of Indiana Porter County My Commission Expires: 11/11/2015 My County of Residence: Porter Commission # 572215 My Commission Expire November 11, 2015 This instrument was prepared by Victor H. Prasco Burke Costanza & Carberry LLP 9191 Broadway, Merrillville, IN 46410 (219) 769-1313 I affirm, under the penalties for perjury, that I have taken reasonable care to redact each social security number in this osument, unless require by law. Professionals Title Services, LLC Lori L. Cassoday 9195 Broadway Merrillville, IN 46410 ATS13-4832 FILED **11036**

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PEGGY HOLINGA KATONA

LAKE COUNTY AUDITOR

INDIANA STATE DEPARTMENT OF HEALTH CERTIFICATE OF DEATH Local No 002883 EDR No 00000280363 1. Decedent's Legal Name (First, Middle, Last) 1a. Maiden Name (If female) 2. Sex

Decedents Legal Name (First, Middle, Last)	<u> </u>	hope to	DR No 000		e)		2. Sex		o 0411 Of Death		Of Death (Mor	th/Day/Yea	
HELMA BALASZEK			WOOD				FEMALE	OR.	:50 AM		09/18/20	12	
Social Security Number 8a. Age - Yrs 6b. Ur	der 1 Year 6c.	Under 1 Mon		6e. Und	er 1 Hour 1		th (Month/Day			ty and State	e or Fareign Co.		
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acility Name (If Not Institution, Give Street and Nu SOUTH HEATHER LANE	mber)			_ 									
City Or Town, State, And Zip Code				13	. County Of	Death			14. Marital St	atus At Tim	e Of Death		
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Residence - State	18a. Coun	nty		18b. (City Or Town		MEMAKE	K		IOWN	HOME		
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Street And Number	(Date			TOILO	VVIV I OI		18d.	Apt. No.	18e, Zip	Code	18f. Inside	City Limi	
SOUTH HEATHER LANE									46	207	⊠ Yes	□ No	
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LIAM WOOD				EVELY	'N WOO	ם			PRII	NCE			
iformant's Name	24a	. Relationship	To Decedent				umber, City, S	ate, Zip Coo		102			
ELYN KIJEWSKI	DA	UGHTER	₹	11766	MARYLA	AND STE	REET, CR	OWN P	OINT, IN	46307			
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State Form 53395 ATTENTION ESTATE: The Social Security # is being requested by this state agency in order to pursue responsibility. Disclosure is voluntary and there will be no penalty for refusal.