

2

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2013 049535

2013 JUL -9 AM 9:59

MICHAEL B. BROWN  
RECORDER

**SURVIVORSHIP AFFIDAVIT**

Comes now Robert E. Houser, who being duly sworn upon His oath, deposes and says:

That Robert E. Houser is the surviving spouse of Nancy D. Houser, deceased, who died June 22, 2001 domiciled in Lake County, Indiana, on July 2nd, 2013

That affiant and Nancy D. Houser acquired title to certain real estate as tenants by the entireties, said real estate being described as follows:

LOT 280, HOMESTEAD ACRES 13TH ADDITION TO THE TOWN OF ST. JOHN, AS SHOWN IN PLAT BOOK 61, PAGE 1, IN LAKE COUNTY, INDIANA.

*Parcel No.: 45-15-05-179-001.000-015*

12336 103rd Court, St. John, IN 46373;

Affiant states that Robert E. Houser and Nancy D. Houser continued to live and cohabit together as husband and wife continuously from the date they took title to the above-described real estate, until the date of Nancy D. Houser's death.

Affiant states that the total assets of said estate, including the proceeds of life insurance policies and real and personal property, were not sufficient to subject the estate to Federal Estate tax and that Indiana Inheritance Tax, if any, has been paid.

This affidavit is made for the purpose of maintaining a clear record of title to the above-described real estate and to induce the appropriate County Authority of Lake County, Indiana, to transfer the above-described real estate to Kelli Litke.

Executed this July 02, 2013.

*Robert E. Houser*

Robert E. Houser

STATE OF INDIANA

COUNTY OF Lake

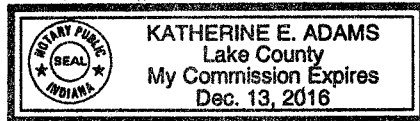
Subscribed and sworn to before me, a Notary Public, in and for said County and State this 2nd day of July, 2013.

*Katherine E. Adams*

Notary Public / Katherine E. Adams  
My Commission Expires: 12/13/16  
My County of Residence: Lake

This document prepared by: Robert E. Houser

File No. 1303774



"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." Katherine Adams

DULY FILED FOR TAXATION SUBJECT  
FINAL AFFIDAVIT FOR TRANSFER  
JUL 08 2013

PEGGY HOUNGA KATONA  
LAKE COUNTY AUDITOR

13-  
KC CT

24130

CHICAGO TITLE INSURANCE COMPANY

CITY OF CHICAGO DEPARTMENT OF PUBLIC HEALTH

STATE OF ILLINOIS COUNTY OF COOK CITY OF CHICAGO

JUN 25 2001

I, JOHN L. WILHELM M.D., LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILLBIRTHS AND DEATHS FOR THE CITY OF CHICAGO BY VIRTUE OF THE LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO; THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY OF A RECORD KEPT BY ME IN ORDINANCE OF SAID LAW AND ORDINANCES.

John L. Wilhelm, M.D. LOCAL REGISTRAR

I affirm, under the penalties for perjury, that I have taken reasonable care to verify each Social Security number in this document, unless required by law. Katherine Adams

THIS CERTIFICATE COPY VALID WHEN MULTICOLORED SIGNATURE SEAL IS AFFIXED.

130374

STATE OF ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER

609920

Form containing fields for DECEASED-NAME (Nancy D. Houser), COUNTY OF DEATH (Cook), DATE OF DEATH (June 22, 2001), SEX (Female), DATE OF BIRTH (December 18, 1946), HOSPITAL (St. Lukes Hospital), MARRIAGE STATUS (Married), OCCUPATION (Clerk), RACE (White), RELIGION (Catholic), CAUSE OF DEATH (Subarachnoid Hemorrhage), and SIGNATURE (Richard W. Byrne).

CHICAGO TITLE INSURANCE COMPANY

JUN 25 2001