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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2014 010972

2014 FEB 25 AM 9:03

MICHAEL S. BROWN
RECORDER

STATE OF INDIANA)
)
) SS:
COUNTY OF JASPER)

AFFIDAVIT OF SURVIVORSHIP

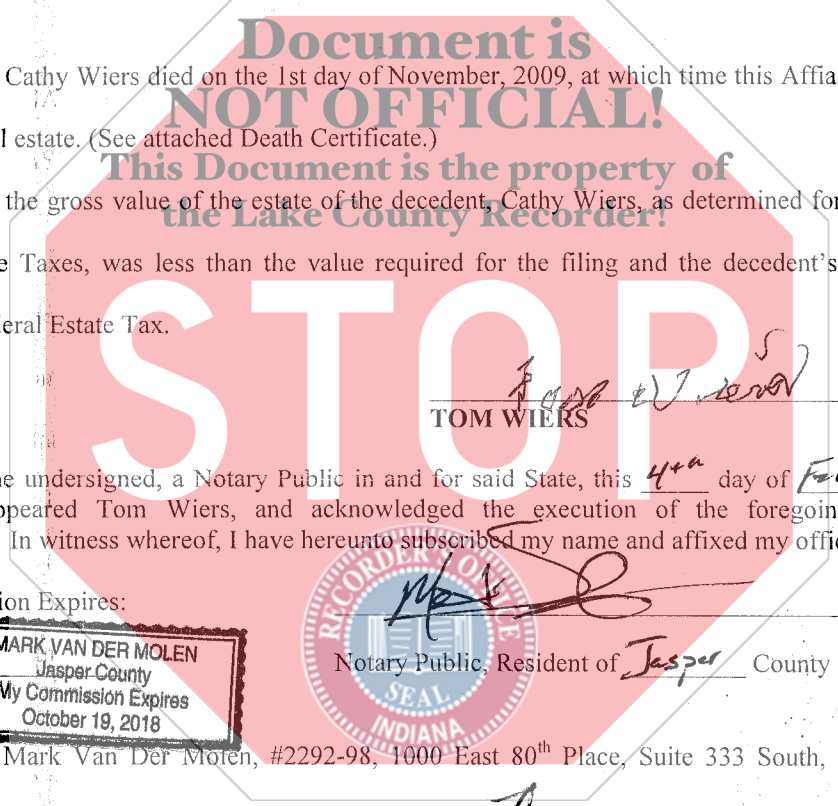
Comes now Tom Wiers, being duly sworn upon his oath and states as follows:

That Tom Wiers and the decedent, Cathy Wiers, acquired title, as husband and wife, to the following real estate: Parcel# 45-07-28-377-001.000-026

Lot 9 in St. James Third Addition, to the Town of Highland, Indiana, as per plat there of, recorded in Plat Book 46 page 6, in the Office of the Recorder of Lake County, Indiana. Commonly known as: 2612-14th Street, Highland, IN 46322

That Cathy Wiers died on the 1st day of November, 2009, at which time this Affiant acquired sole title to the real estate. (See attached Death Certificate.)

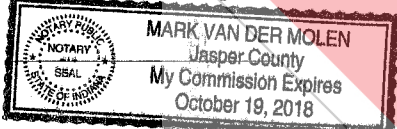
That the gross value of the estate of the decedent, Cathy Wiers, as determined for the purpose of Federal Estate Taxes, was less than the value required for the filing and the decedent's estate was not subject to Federal Estate Tax.



[Signature]
TOM WIERS

Before me, the undersigned, a Notary Public in and for said State, this 4th day of February, 2014, personally appeared Tom Wiers, and acknowledged the execution of the foregoing Affidavit of Survivorship. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

My Commission Expires:



[Signature]
Notary Public, Resident of Jasper County

Prepared by: Mark Van Der Molen, #2292-98, 1000 East 80th Place, Suite 333 South, Merrillville, IN 46410.

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.

/s/Mark Van Der Molen

FILED

FEB 20 2014

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

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INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

Local No. 3780-09

State No.

Form containing fields for decedent's name (Cathy L. Wiers), date of death (Nov. 1, 2009), birth date (May 7, 1954), cause of death (Coronary Artery disease), and certifier information (E. Astour).