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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2014 028431

2014 MAY 19 AM 9:22

MICHAEL B. BROWN
RECORDER

AFFIDAVIT TO EXTINGUISH LIFE ESTATE

Nancy Lynn Powers, of adult age, being first duly sworn, upon deposes and says:

That Nancy Lynn Powers, is the Daughter of Edward G. Nordmann, deceased, who died on January 21, 2011 a resident of Lake County, Indiana.

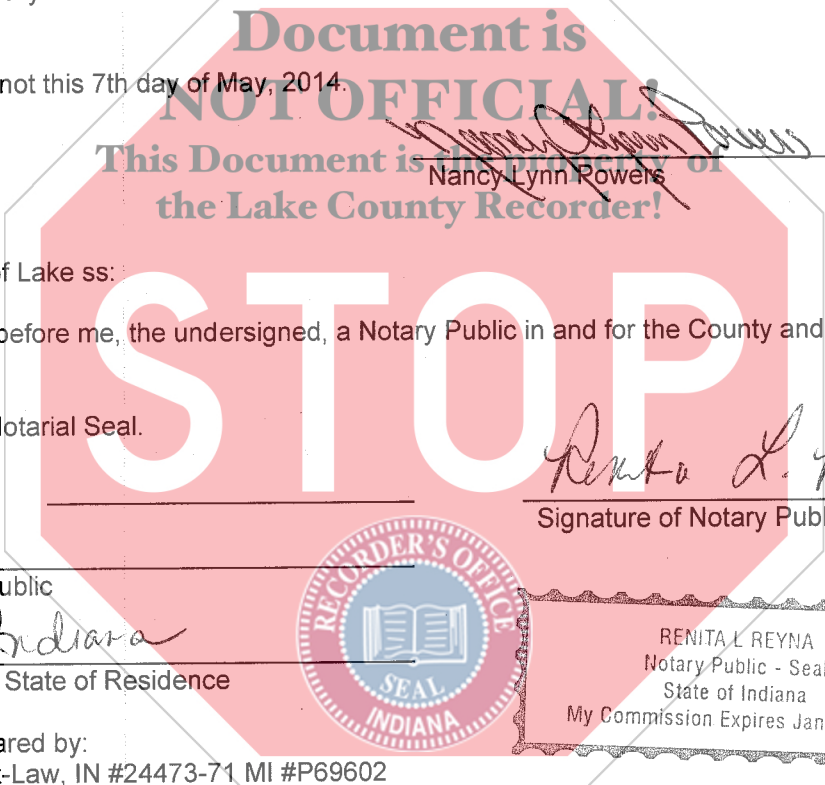
That said decedent acquired a Life Estate Interest to the following described real estate located in Lake County, IN to wit:

SEE ATTACHED LEGAL DESCRIPTION

and hereinafter sometimes called "the Real Estate" for convenience by a Deed from Edward G. Nordmann and Nancy R. Nordmann, Husband and Wife recorded June 19, 2002 as Document No. 2002-055632 in the Office of the Office of the Recorder of Lake County, Indiana.

That the purpose of this affidavit is to induce the Auditor of the County in which said real estate is located to change the tax records, and, if necessary to remove the Life Estate Interest of Edward G. Nordmann.

And further affiant sayeth not this 7th day of May, 2014.



State of Indiana, County of Lake ss:

Subscribed and sworn to before me, the undersigned, a Notary Public in and for the County and State aforesaid, this 7th day of May, 2014.

WITNESS my hand and Notarial Seal.

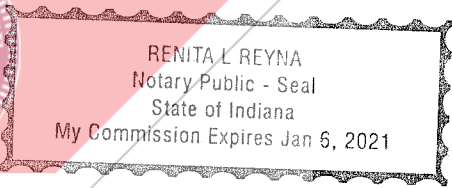
My Commission Expires:

Renita L. Reyna
Signature of Notary Public

Printed Name of Notary Public

Lake Co., Indiana

Notary Public County and State of Residence



This instrument was prepared by:
Debra A. Guy, Attorney-at-Law, IN #24473-71 MI #P69602
202 S. Michigan Street, Ste. 300, South Bend, IN 46601

Property Address:
1705 West 95th Court, Crown Point, IN 46307

File No.: 14-7015

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. *Debra A. Guy* (Type or Print Name)

HOLD FOR MERIDIAN TITLE CORP
14-7015

FILED
MAY 15 2014

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

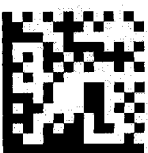
*#16
MT
CA*

1 ref



LEGAL DESCRIPTION

Lot Numbered 29 in Fountain Ridge 2nd Addition, Unit 2, to the City of Crown Point, as per plat thereof recorded in Plat Book 42, page 4 in the Office of the Recorder of Lake County, Indiana.



1954313-1005

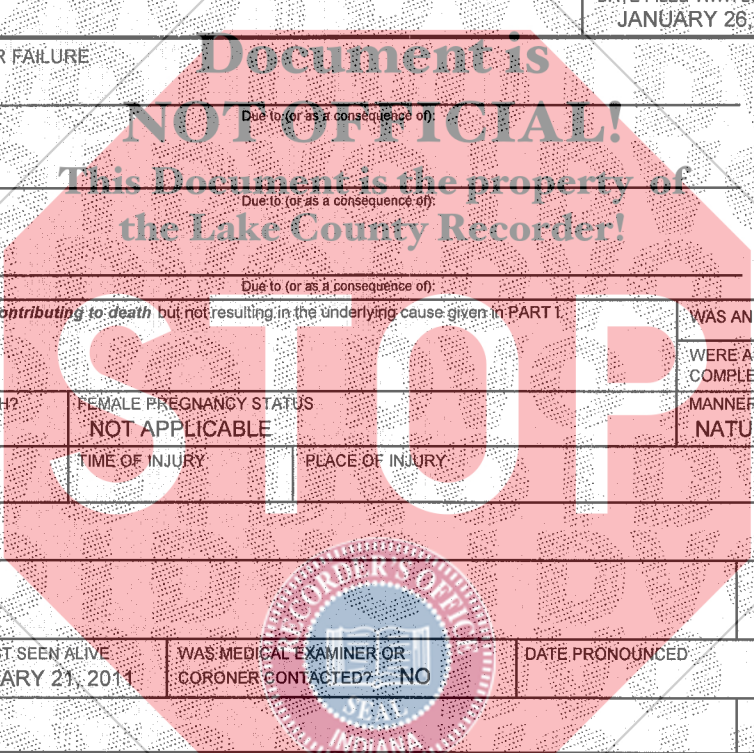
CERTIFICATION OF DEATH RECORD

**COOK COUNTY CLERK VITAL RECORDS
CHICAGO, ILLINOIS
MEDICAL CERTIFICATE OF DEATH**

STATE FILE NUMBER 2011 0005959

DATE ISSUED 02/15/2011

DECEDENT'S LEGAL NAME EDWARD G NORDMANN				SEX MALE	DATE OF DEATH JANUARY 21, 2011
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 71 YEARS	DATE OF BIRTH DECEMBER 26, 1939		
CITY OR TOWN CHICAGO			HOSPITAL OR OTHER INSTITUTION NAME UNIVERSITY OF CHICAGO MEDICAL CENTER		
PLACE OF DEATH INPATIENT					
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED]	MARITAL STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE'S NAME NANCY SCECINA		EVER IN U.S. ARMED FORCES? YES
RESIDENCE 1705 WEST 95TH COURT		APT. NO.	CITY OR TOWN CROWN POINT		INSIDE CITY LIMITS? YES
COUNTY LAKE	STATE IN	ZIP CODE 46307	FATHER'S NAME GEARHARD NORDMANN		MOTHER'S NAME PRIOR TO FIRST MARRIAGE ANNA ANTANITUS
INFORMANT'S NAME DARLENE PARKS		RELATIONSHIP HOSPITAL RECORDS	MAILING ADDRESS 5841 SOUTH MARYLAND, CHICAGO, IL, 60637		
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION CALUMET PARK CEMETERY	LOCATION - CITY OR TOWN AND STATE MERRILLVILLE, IN	DATE OF DISPOSITION JANUARY 26, 2011	
FUNERAL HOME DONNELLAN FUNERAL HOME, 10525 S. WESTERN AVE, CHICAGO, IL, 60643					
FUNERAL DIRECTOR'S NAME JOHN G SCHULTZ				FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011049	
LOCAL REGISTRAR'S NAME DAVID ORR				DATE FILED WITH LOCAL REGISTRAR JANUARY 26, 2011	
CAUSE OF DEATH PART I: LIVER FAILURE IMMEDIATE CAUSE (Final disease or condition resulting in death) a. _____ Due to (or as a consequence of): b. _____ Due to (or as a consequence of): c. _____ Due to (or as a consequence of): APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH					
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.				WAS AN AUTOPSY PERFORMED? NO	
DID TOBACCO USE CONTRIBUTE TO DEATH?				WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
FEMALE PREGNANCY STATUS NOT APPLICABLE		MANNER OF DEATH NATURAL			
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY		INJURY AT WORK?	
LOCATION OF INJURY				IF TRANSPORTATION INJURY, SPECIFY	
DESCRIBE HOW INJURY OCCURRED:					
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE JANUARY 21, 2011	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO		DATE PRONOUNCED	TIME OF DEATH 09:10 PM
CERTIFIER PHYSICIAN				DATE CERTIFIED JANUARY 21, 2011	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH NIKHIL JARIWALA MD, 5841 SOUTH MARYLAND, CHICAGO, ILLINOIS, 60637				PHYSICIAN'S LICENSE NUMBER 125056330	



This is to certify that this is a true and correct copy from the official death record filed with the Illinois Department of Public Health.

David Orr
David Orr
Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE