STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2015 023345

2015 APR 17 PM 2:59

MICHAEL 8. SROWN RECORDER

Property Number: 45-11-14-14-407-018.000-036 Tax Mailing Address: 7432 JEFFREY ST SCHERERVILLE IN 46375-3502

Certification of Trust

and

Affidavit of Trustee in Aid of Title to Real Estate

State of Indiana

ocument is

County of Lake

This Document is the property of

Sharon L. Botta, the Affiant, being first duly sworn on her oath, states:

- Sharon L. Botta is an adult residing at 7432 Jeffrey Street, Schererville, Indiana 46375-3502, in Lake County, Indiana, and has knowledge of the facts stated herein as the sole Trustee under the Botta Revocable Trust Agreement dated April 10, 2012, and as the surviving spouse of George H. Botta, also known as George Howard Botta.
- The Botta Revocable Trust Agreement dated April 10, 2012, currently exists and the trust agreement creating the Botta Revocable Trust Agreement dated April 10, 2012, was executed on April 10, 2012.
- 3. George H. Botta and Sharon L. Botta were the settlors of the trust.
- Sharon L. Botta, whose current address is 7432 Jeffrey Street, Schererville, Indiana 46375-3502 is the currently acting sole trustee.
- 5. Sharon L. Botta, as sole trustee, has the following powers, among others: to sell any trust property, for cash or on credit, at public or private sale.

(Certification of Trust and Affidage of Trust e in Tid of Title to Real Estate - Page 1 of 3)

APR 17 2015

HOLD FOR GREATER INDIANA TITLE COMPANY

JOHN E. PETALAS LAKE COUNTY AUDITOR

011557

IN000315

- 6. The trust is revocable.
- 7. There is no successor co-trustee. There is one trustee, namely, Sharon L. Botta, the sole trustee, who has the authority to sign or otherwise authenticate documents and exercise the powers of the trustee.
- 8. The following described real estate is an asset of the trust:

Legal description:

Lot 13 in Autumn Creek, Block Nine, Phase One, an Addition to the Town of Schererville, as per plat thereof, recorded in Plat Book 91, page 26, in the Office of the Recorder of Lake County, Indiana

Commonly known as: 7432 Jeffrey Street

Schererville, Indiana 46375-3502

Property Number:

This Document is the property of er: 45-11-14-14-407-018.000-036

- 9. George H. Botta, also known as George Howard Botta, one of the original co-trustees of said trust, died on December 24, 2012. A certified copy of the Indiana State Department of Health Certificate of Death of George H. Botta, also known as George Howard Botta, is attached hereto and made a part hereof by reference.
- 10. The Botta Revocable Trust Agreement dated April 10, 2012, has not been revoked, modified, or amended in any manner that would cause the representations contained in this Certification of Trust and Affidavit of Trustee in Aid of Title to Real Estate to be incorrect.
- 11. The purposes of the filing and recording of this Certification of Trust and Affidavit of Trustee in Aid of Title to Real Estate include the following:

to induce the Lake County Auditor's Office to reflect on the Auditor's Transfer Record that Sharon L. Botta, Trustee of the Botta Revocable Trust Agreement dated April 10, 2012, is the owner of said real estate;

to place of record with the Lake County Recorder's Office evidence that Sharon L. Botta is the sole Trustee of the Botta Revocable Trust Agreement dated April 10, 2012; and

(Certification of Trust and Affidavit of Trustee in Aid of Title to Real Estate - Page 2 of 3)

to place evidence of record that Sharon L. Botta, as Trustee of the Botta Revocable Trust Agreement dated April 10, 2012, is authorized and empowered to sell said real estate.

Further Affiant saith not.

Dated: April 13, 2015

Sharon L. Botta

State of Indiana

, SS:

County of Lake

Document is

Before me, the undersigned Notary Public in and for said County and State, personally appeared Sharon L. Botta, the Affiant, and acknowledged the execution of the foregoing Certification of Trust and Affidavit of Trustee in Aid of Title to Real Estate, and having been duly sworn upon her oath, stated that the representations and certifications contained therein are true.

Witness my hand and Notarial Seal this 13th day of April, 2015.

LAUREN VANTIL
Lake County
My Commission Expires
November 26, 2016

Notary Public (Signature)

Notary Public (typed or printed name)

Notary's County of Residence:

Notary's Commission Expires:

After Recording Return to and Mailing Address of Affiant: SHARON L. BOTTA

7432 JEFFREY ST SCHERERVILLE IN 46375-3502

The foregoing instrument was prepared by Chris Fox, Attorney at Law, Indiana License No. 19091-64; Address: 516 East 86<sup>th</sup> Avenue, Merrillville, IN 46410-6213 (Phone: 219/791-1520; Fax: 219/791-9366), using Greater Indiana Title Company commitment number IN000315 as a reference.

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. Chris Fox

(Certification of Trust and Affidavit of Trustee in Aid of Title to Real Estate - Page 3 of 3)

## INDIANA STATE DEPARTMENT OF HEALTH CERTIFICATE OF DEATH

Decedent's Logal Name (Fizz	<u>No 004</u> , Middin, Lapij	<u> 10,73</u>				lo 000( 1a. Makten Nan	002967	<u> 790</u>	2. Bex	State 3.1	No 057	821	ula Di Dasih (Manih/Div/		
ORGE HOWARD	BOTTA				_				MALI	=	37:36 PM		12/24/2012		
Social Security Number Ba.	Age − Yrs	βb Uni⊈r	1 Year	BG, Under 1	Month 8d.	Under 1 Day	Bà. Under 1 Hèu	7. Oxt	MOM KNIE to	/Day/Year)		(City and S	Ale or Paraign Country)		
355-30-6851	72	Merrina In Occurred In	A Diam	Oays	Но	u/i	Minutes		04/17/194		CHICAG	O, IL			
Yas 🖾 Na 🗀 Unknown	j						10s. If Death Oc.		ewhere Other Ti December II a House			term Cara l	Pacifity		
Facility Name (If Not Institute		DE A Number	YOUGA I'S	արաստում Օմ (	Bliew 🗀	Dane on Arnvol	Cher (Specify	y)							
32 JEFFREY STRE	ET		'' 	-	<u> </u>										
ord or rown, sinin, And zip	(2008						13. Count	Of Death			1		ims Of Death d, But Separated _ Div		
CHERERVILLE, IN, 46375  Surviving Spouse's Nama					LAKE				16. Decidents Usual Occupation			Idowed Never Married United			
ATION DON'T									, DECEDENT	2 42041 4441	ay work	"- "	ri 🗘 🗪 Diddii ioomii iroonii.		
ARON BOTTA Revisiones - State	·	_ <del></del>	18a. (	County	MALO	NEY	18b, City Or To	DWT)	MEAT CU	ITER .		ALB	ERTSONS		
ANAIC			LAKE	•			l								
Strant And Number			LANG	<b>.</b>			ISCHERER	VILLE	V 1	8d, Apl No.	784, 2	pip Code	18f. Inside City Lin		
32 JEFFREY STRE	ΕT			•	_/,							der 70	2 Yes □ No		
Decedent's Education			30.	Decedent OI	fispanic Or	loln C	U Tipa	Dacedanila	Aata	<del>\</del> -	4	6375	<del>-                                    </del>		
SH SCHOOL GRAD MPLETED		RGED	l <sub>NC</sub>	THISPA	NIG _		Whi	to _	_ , _						
attiers Name (First, Middle, L	nai)		<u></u>		NU		23, Mother's Name	(FireL Mid:	ila, Last)	7	231	s. Moiner's	Maiden Last Name		
ARLES BOTTA				TOTAL .	D		HELEN BOT	TA			ALI	BERTS	ÓN		
Normant's Nume		L/		2da Rulallon	NP To Onc	ndbni	246. Molling Addes	(Strant /	and Number, City	, Slate, 21p (					
ARON BOTTA		_/_		WIFE +	he I		7432.JEFFR	EY STE	REET, SCH	ERERV	LLE, IN 46	375			
Malnod Cif Dispassion	<del>-, -</del>	2	sb, P(•¢	of Olspositio	(Naine C	75. Place Cometety, Cre	a Of Disposition malory, Dither Place	) 25c. L	ocadon - Cky, To	wn, And Sin	d				
iuriał 🗵 Cremellon 🗌 Don Jernoval From State	allen 🔲 Ento	माध्यम्बत													
ther (Spacify):		JH	EIGH	TS CREE	MATOR	Υ		CHIC	AGO HEI	GHTS, IL					
Ves Corener Contacted?	27. 1	Name And Co	, stalom	Address Of Fu	lerel Facility	y .						279.	Funtrial Home License Nu		
Yes 🗵 No	LING	CCLN R	DGE	FUNERA	L HOM	E, 7607 W	LINCOLN F	IIGHW/	AY, CROW	N POIN	i <del>,</del>  ₩ <del>-</del> #\$30,	7. ERB	8800070		
Bignation Of Indiana Funeral VUJKO, BY ELEC	PRONIÇ	SIGNAT	URE						27c.	muk esnesu 1008300	har (Of License)	PE WI	and		
Pari I, Errier The <u>Chain Of</u> th As Cardiac Arreal, Respi Ina. Add Addithal Linas if I	<u>Evanta</u> - Dia ratory Arrest, Nacassary,	onadba, Injur OrVoninicu	lea, Or dar Pibr	Complication	Cause C - That Di A Showing	Y Death (899 requiy Coused I The Ethology,	Instructions And The Death, Do Not Do Not Abbrevials	Examples Enter Ten Enter On	)	), ( ) = _ F	enmen.		Approximate Intervet One To Death		
nediate Cousp (Final Diana	so Or Condili	ion Resulting	tn Öst	nth)	MEST	THELIOMA				JAN	02 2013	9	YEARS		
manufatha lilat dan ditta a				1	i		THE DOC	Detri fizi (Dir A	n v Count distant CU:						
quentielly List Conditions, il e A. Enler Tha Underlying ( a Events Réaulling in Deeth	Sáude (Llisen	g in the Ca ind Or Miny	Thul ir	ipjalea ipg Ou		É		Danie (Gra	A Cerebility and 150.			7			
S EAST OF MARKET IN THE TARRET	) rasi					FE	) ·	Dura ta (DF J)	T courtée de cuit						
					)	~			14 6 6494	\$1.00 \$1.00 \$ \$1.00 \$1.0	p,ppa-				
i, Enler Oiner <u>Blocklicent Cond</u>	illons-Conidba	uting to Death	Bud No	i Fleardling in	he Underfy	ing Cause Givin	in Parti		An Autopay Pér		☐ Yes				
id Tobacoc Use Contribute To	Death?	T 32. If	Female:			E	SEAL.	30, Wg	Autopty Findin	g Available Ti i3. Mannar C	· ·	Causa Of	Yes CI		
B 口 Frobably 口 No 因	Unknown	☐ No	d Prognant	Affain First Year			Text Proposed, Sul Paris	132	heyra Of Decelly	S Neimil 🗆	] Homicide 🔲		Pending Investigation		
pto CY Injury (Month/Day/Year	<del>)</del>		Trace Of 1	aut Propried 40 () rijery	y=74.1 year t		Of Injury (E.G., Dire				Could Not By		37. Injury Al Work?		
		_ [	_			1						1	Yes No		
ocation Of Irgury - State		38e. C	ity Or T	DWN.		áith, Stra	el & Number				Зёц Арц	No.	38d, Zip Cods		
aperioe How Injury Occurred	<del></del>														
									ĺ	O. If Transpo Distro/Decision	Parantal	pecify:  Pedesman [	] Care (steing)		
		Signature, Of Person Certifying Ceute Ct Depth; WIN L ROBIN , BY ELECTRONIC SIGNATURE Name, Address And Zip Code Of Person Certifying Causes of Death;							42. Certifier	er (Check Only One) /my Physician   Commer   Heath Officer   A4, Ummae Number   45, Date Centified					
gnature, of Person Certifylro JIN L ROBIN . BY E	LECTRO	NIC SIG	OF DATE	1;				WIN L. ROBIN . 801 MACARTH JR BOULEVARD SUITE 401, MUNSTER, IN 46321							
gnature, Of Person Coulying /IN L ROBIN , BY E unu, Address And Zip Code of /IN L ROBIN BO1	LECTRO IT PRISON CON MACART	NIC SIG	OLD-FI	1;	JITE 40	1, MUNST	ER, IN 4632	1 ,	4.0	01038			45, Date Certified 12/27/2012		
mature, of Person Cerulyling IN L ROBIN, BY E ame, Address And Zip Code of IN L ROBIN, 801 distributed Furnand Barvice Provi gnature of Local Health Office	LECTRO IT Person Cons MACART der,	NIC SIG	OFDIN	VARD SI	JITE 40	1, MUNST	ER, IN 4632	1	49. For Right	47, Ak		vO×y/Y≡ar	12/27/2012		
gnature, Of Person Coulying JIN L ROBIN, BY E anno, Address And Zip Code of JIN L ROBIN BO1	LECTRO IT Person Cons MACART der,	NIC SIG	OFDIN	VARD SU					_	47, Ak	40;		12/27/2012		
onsiture, Of Person Corulying IN L ROBIN, BY E ame, Address And Zip Code of IN L ROBIN, 801 Idistance Furnished Barvices Provi andium of Local Health Offices	LECTRO IT Person Cons MACART der,	NIC SIG	OFDIN	VARD SU			ER, IN 4632 Of DEATH (ENT		_	47, Ak	49; ale Filed (Mont		12/27/2012		
nature, Of Person Corulying IN L ROBIN, BY E Imu, Address And Zip Code D IN L ROBIN, 801 dillonal Funeral Barvice Provi anature of Local Health Office	LECTRO IT Person Cons MACART der,	NIC SIG	OFDIN	VARD SU					_	47, Ak	49; ale Filed (Mont		12/27/2012		