

SURVIVORSHIP AFFIDAVIT

2017 000061

STATE OF INDIANA)
)
) SS:
COUNTY OF Lake)

Cathy Perez *CP* [insert name of person making affidavit],
being first duly sworn upon oath deposes and says:

1. That Maria A Perez NKA MARIA PEREZ [insert name of deceased person]
(the "Decedent") died on the 3rd day of April, 2017

at Community Hospital [and insert location of death]
2. That the Decedent and Samuel Perez [insert name of Decedent's spouse] were duly and legally married at the time they acquired the husband and wife to the following described real estate:

Legal Description:

Parcel: 45-03-32-127-017-000-00
Lot 30, Blk 5, Subdivision of the East 1510.2 Ft of the North
1320 Ft of the Northwest Quarter of Section 32, Township
37 North, Range 9 West of the 2nd P.M. except the East
201 FT thereof, in the City of East Chicago, as shown
in Plat Book 2, Page 16, In Lake County, IN.
Known as 4937 Northcoté East Chicago IN.

- 3. That the marital relationship which existed between them at the time they acquire title to said real estate remained in effect and unbroken until the date of the decedent's death.
- 4. That all funeral expenses in connection with the death of the Decedent have been paid in full.
- 5. That all of the assets of the Decedent which would be includable for Federal State Tax purposes, including joint bank accounts and life insurance on the Decedent's life were not sufficient to necessitate payment of Federal Estate Tax.

Further affiant sayeth not.

Cathy Perez
Signature of Affiant
Cathy Perez

Type or Print Name

STATE OF INDIANA)
)
) SS: **ACKNOWLEDGMENT**
COUNTY OF Lake)

07534

Before me, a Notary Public in and for said County and State, personally appeared Cathy Perez who acknowledged the execution of the foregoing instrument, and who, having been duly sworn, stated that any representations therein contained are true.

FILED
JAN 03 2017
JOHN E. PETALAS
LAKE COUNTY AUDITOR

non \$1400
con
JTB
cash

Witness my hand and Notary Seal this 28 day of December, 2016.

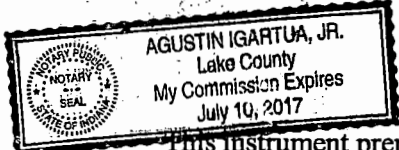
Resident of Lake County, Indiana

Signature [Handwritten Signature]

My Commission Expires: July 10, 2017

Printed Agustín Igartua Jr.

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



[Handwritten Signature]
Name

This instrument prepared by: Cathy Perez - Power of Attorney

