

SMALL ESTATE AFFIDAVIT  
Indiana Code Section 29-1-8-3

2017 002715

State of Indiana )  
 )SS:  
County of Porter )

I, Deana Brehmer, the undersigned Affiant, being first duly sworn to oath, hereby depose and say as follows:

1. The decedent's name is Janice Murzyn.

2. The date of the decedent's death was July 18, 2016, and at least forty-five days have elapsed since the death of the decedent. I have attached a copy of the decedent's death certificate hereto.

3. My residence address is: 831 Yorktown Street, Valparaiso, IN 46385.

4. I am the only child of the decedent, and the decedent's spouse predeceased her, and she never remarried.

5. The decedent's property includes real property: 4350 Elm Avenue, Hammond, IN 46327, Parcel No. 45-03-30-178-033.000-.023, with an assessed value of \$ 39,500. The legal description of said property is as follows:

LOT 46 AND THE SOUTH 7 FEET OF LOT 45 IN BLOCK 2 IN F.R. MOTT'S 2<sup>ND</sup> ADDITION TO HAMMOND, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 2 PAGE 9, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

6. All the successors of the decedent, Janice Murzyn, and their respective shares are listed below:

Name/Relationship	Address	Share
Deana Brehmer (daughter and only heir)	831 Yorktown Street Valparaiso, IN 46385	100 %

7. It appears that the decedent's gross probate estate, less liens and encumbrances, does not exceed the sum of the following: Fifty Thousand Dollars (\$50,000.00), the costs and expenses of administration, and reasonable funeral expenses.

8. No application or petition for the appointment of a personal representative is pending or has been granted in any jurisdiction.

AND FURTHER AFFIANT SAYETH NAUGHT.



STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
2017 JAN 13 PM 1:21  
MICHAEL B. BROWN  
RECORDER

FILED  
JAN 13 2017  
JOHN E. PETALAS  
LAKE COUNTY AUDITOR

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THE FOREGOING STATEMENTS ARE MADE UNDER THE PENALTIES OF PERJURY.

Deana Brehmer  
Deana Brehmer

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

Michael T. Sawyer  
Michael T. Sawyer

STATE OF INDIANA )  
COUNTY OF PORTER )

**Document is NOT OFFICIAL!**

**This Document is the property of the Lake County Recorder!**

Before me personally appeared Deana Brehmer, this 1<sup>st</sup> day of September, 2016, who acknowledged her execution of the within Small Estate Affidavit.

Commission Expires:

Dec 2, 2018



Deborah Michele Briseno  
Notary Public

Deborah Michele Briseno  
Printed Name

LaPorte, Indiana  
County of Residence

This instrument was prepared by: Michael T. Sawyer, Esq., Law Offices Of Michael T. Sawyer,  
830 East Sidewalk Road, Chesterton, IN 46304



INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

Local No 000719

EDR No 00000522764

State No 034061

Form with fields for decedent information (Name, Age, Sex, Date of Death), social security number, birth information, cause of death, and certifier information. Includes a large red 'STOP' watermark and a 'Document is NOT OFFICIAL' stamp.