

SMALL ESTATES AFFIDAVIT

3

→ DEBORAH BROWN, being first duly sworn on his oath, states:

1. That she is the daughter of Carole Anne DeMarco, who died intestate on March 28, 2016. AKA Ann DB

2. That the value of the decedent's gross probate estate, less liens and encumbrances, does not exceed the sum of Fifty Thousand Dollars (\$50,000.00), plus the costs and expenses of administration, and reasonable funeral expenses.

3. That the decedent was the owner of the real property commonly known as 7132 Chestnut Avenue, Hammond, Indiana, 46324, commonly known as LOT NO. ONE, AKA MARKED AND LAID DOWN ON RECORDED PLAT OF VERNON'S ADDITION TO THE CITY OF HAMMOND IN LAKE COUNTY, INDIANA, AS THE SAME APPEARS OF RECORD IN PLAT BOOK 29, PAGE 81 IN THE RECORDER'S OFFICE OF LAKE COUNTY, INDIANA

4. It appears that the decedent's gross probate estate, less liens and encumbrances, does not exceed the sum of the following: the allowance, if any, provided by IC 29-1-4-1, the costs and expenses of administration, and reasonable funeral expenses.

5. That Deborah Brown is entitled to the real property as a result of decedent's death, as she is a daughter of the decedent.

6. The above was determined by the intestate succession statutes of the state of Indiana.

7. I have personal knowledge of the foregoing matters stated herein.

FURTHER AFFIANT SAITH NOT.

Date: JANUARY 12, 2017

Deborah Brown
JOHN E. PETALAS
LAKE COUNTY AUDITOR

2017 008169

2017 FEB 6 PM 3:21

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

FILED

FEB 06 2017

020942

16-
CAST
now

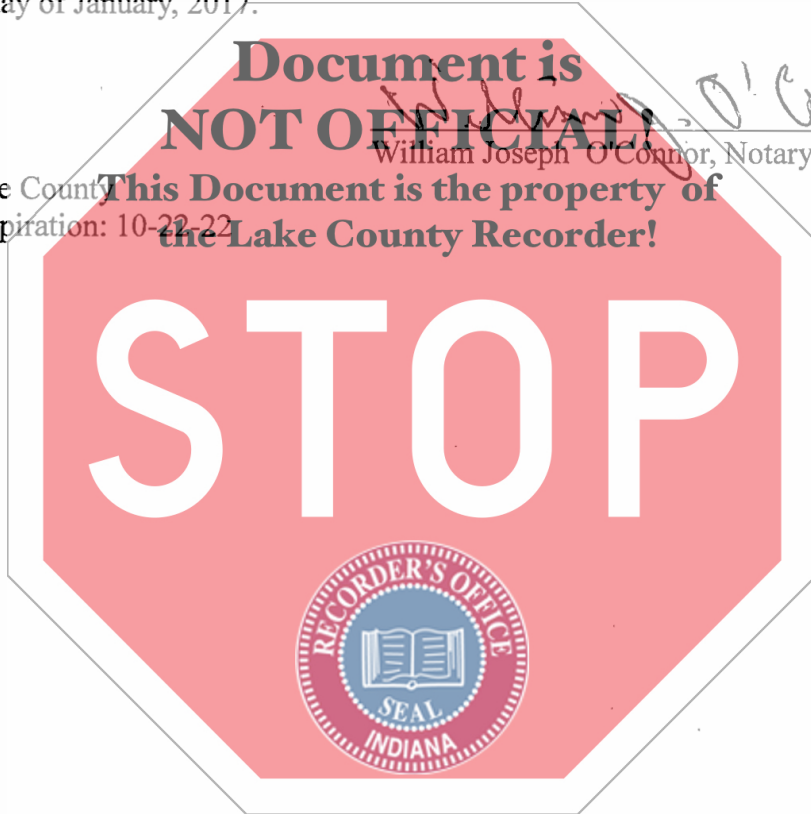


STATE OF INDIANA)
)SS:
COUNTY OF LAKE)

SUBSCRIBED AND SWORN to before me a Notary Public in and for said County and State this 12th day of January, 2017.

Document is NOT OFFICIAL!
William Joseph O'Connor
William Joseph O'Connor, Notary Public

Resident of Lake County
Commission Expiration: 10-22-22
This Document is the property of the Lake County Recorder!





INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH - RESUBMIT

Tracking No. 85250

Local No 001130

EDR No 00000504515

State No 016008

Main form containing fields for decedent information (CAROLE ANN DEMARCO), birth details (01/04/1938), death location (MUNSTER COMMUNITY HOSPITAL), cause of death (ABDOMINAL AORTIC ANEURYSM RUPTURE), and certifying officer (LINUS B. GANDHI).



THIS IS A TRUE COPY OF RECORD ON FILE WITH THE LAKE COUNTY HEALTH DEPARTMENT
APR 12 2016

NOT VALID UNLESS