

9

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2017 020106

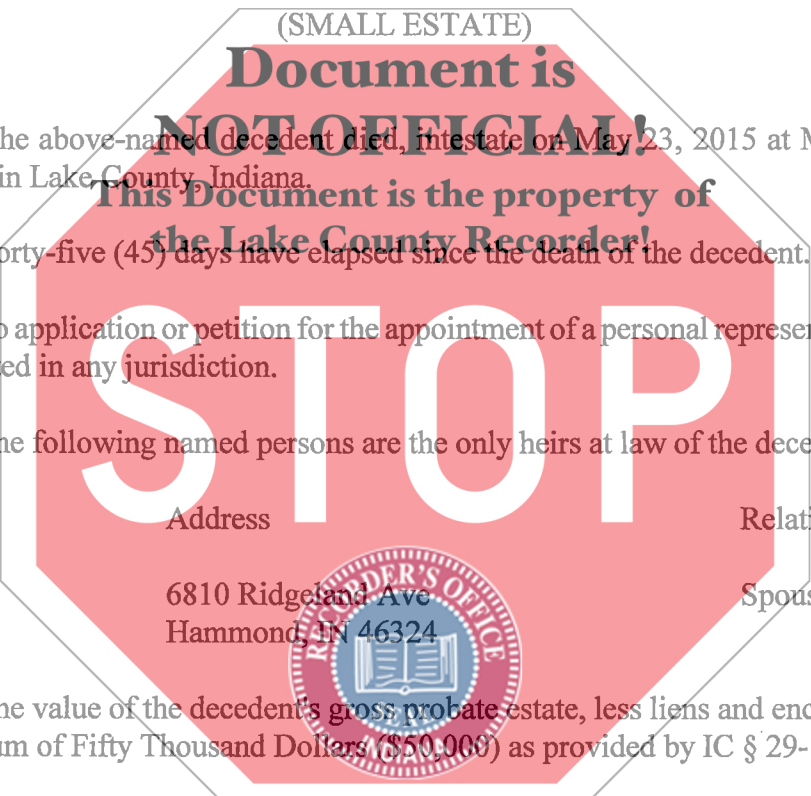
2017 MAR 29 AM 10:59

STATE OF INDIANA  
COUNTY OF LAKE

MICHAEL B. BROWN  
RECORDER

IN RE: ROOSEVELT UPSHAW,  
DECEDENT

AFFIDAVIT FOR TRANSFER OF REAL PROPERTY  
(SMALL ESTATE)



1. That the above-named decedent died, intestate on May 23, 2015 at Munster, Indiana, while domiciled in Lake County, Indiana.

2. That forty-five (45) days have elapsed since the death of the decedent.

3. That no application or petition for the appointment of a personal representative is pending or has been granted in any jurisdiction.

4. That the following named persons are the only heirs at law of the decedent:

Name	Address	Relationship
Sarah Upshaw	6810 Ridgeland Ave Hammond, IN 46324	Spouse

5. 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) as provided by IC § 29-1-8-1.

6. That the decedent's probate assets consist solely of a parcel of real estate which was owned by the decedent at the time of his death located in Lake County, Indiana and more particularly described as follows:

Lot 9, Block 2, Kelly-Glover-Vale Parkside Addition, in the City of Gary as shown in Plat Book 18, page 2, in Lake County, Indiana

Commonly known as: 3535 Fillmore, Gary, Indiana  
Parcel no. 45-08-21-377-006.000-004

with total value of approximately \$25,000.00.

FILED

MAR 29 2017

JOHN E. PETALAS  
LAKE COUNTY AUDITOR

\$13.00  
M.E  
H8635

022371

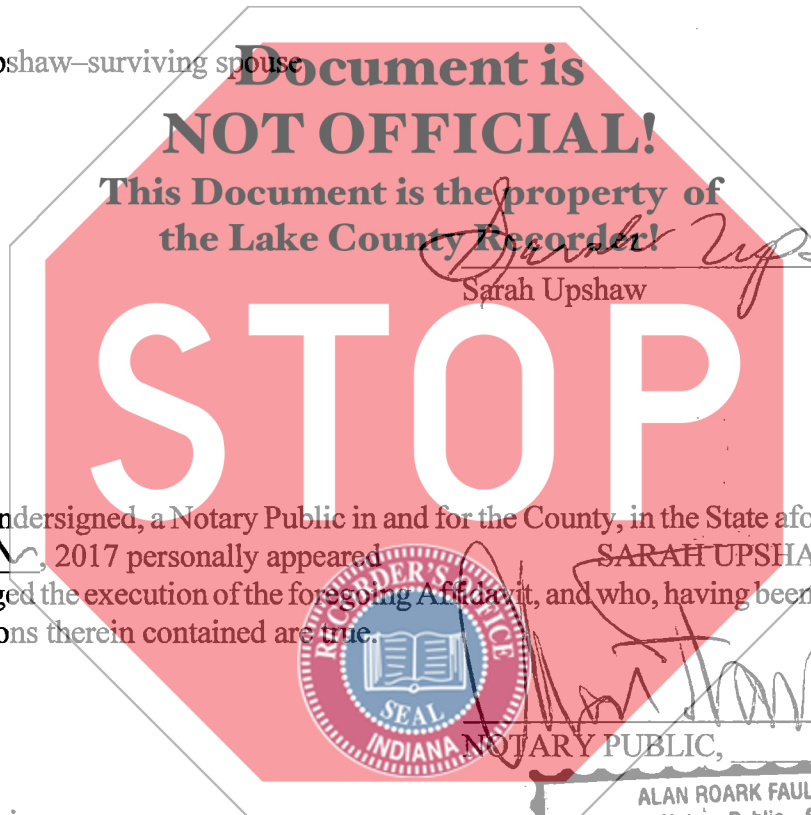
7. That the following list of persons, firms or corporations are the only creditors of the estate and the amount set opposite each name is the sum due said creditor, so far as the same is known to the affiant:

Name	Address	Amount Due
N/A		

8. That the sole heir of the decedent is his surviving spouse, Sarah Upshaw.

9. That the individual entitled to the estate, including real estate, as a result of decedent's death is:

Sarah Upshaw—surviving spouse



State of Indiana

County of Lake

Before me, the undersigned, a Notary Public in and for the County, in the State aforesaid, this 28<sup>th</sup> day of March, 2017 personally appeared SARAH UPSHAW, who acknowledged the execution of the foregoing Affidavit, and who, having been sworn, stated that any representations therein contained are true.

Commission expires \_\_\_\_\_  
County of Residence \_\_\_\_\_



Instrument Prepared By: Marcia L. Clegg, 15 Lawndale Street, Hammond, IN 46324

“I, Marcia L. Clegg, affirm, under penalties for perjury, that I have taken reasonable care to redact each Social Security Number in this document unless required by law.”

Mail To: **MARCIA L. CLEGG  
CLEGG & FAULKNER, P.C.  
15 Lawndale Street  
Hammond, Indiana 46324**