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2017 044972

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 JUL 20 AM 10: 18

MICHAEL B. BROWN RECORDER

Case # 920171481

## SURVIVORSHIP AFFIDAVIT

Comes now Terrance A. Thompson, who being duly sworn upon his/her oath, deposes and says:

That, Terrance A. Thompson is the surviving spouse of Cindy J. Thompson aka Cynthia J. Thompson, deceased who died domiciled in Lake County, Indiana, on May 17, 2016.

**That** Cindy J. Thompson aka Cynthia J. Thompson and Terrance A. Thompson acquired title to certain real estate as tenants by the entireties, said real estate being described as follows:

SEE ATTACHED EXHIBIT "A"

Affiant states that Cindy J Thompson aka Cynthia J. Thompson and Terrance A. Thompson continued to live and cohabit together as the band and vite continuously from the date they took title to the above-described real estate, and the date of Cindy J. Thompson aka Cynthia J. Thompson's death.

Affiant states that the total assets of said estate, including the proceeds of life insurance policies and real and personal property, were not sufficient to subject the estate to Federal Estate Tax and that Indiana Inheritance Tax, if any, has been paid.

This affidavit is made for the purpose of maintaining a clear record of title to the above-described real estate and to induce the appropriate county authority of Lake County, Indiana, to transfer the above-described real estate to Terrance A. Thompson.

Executed: July 12, 2017

Signature CR 2 Thompson

STATE OF

INDIANA

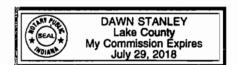
COUNTY OF LAKE

Subscribed and sworn to before me, a Notary Public in and for said county and state this 12thday of July,

2017.

Notary Public Dawn Stanley
Resident of Dake, IN County
My Commission expires: 7/29/2018

Prepared by: Terrance A. Thompson



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

Return to:

Terrance A. Thompson

FIDELITY - HIGHLAND

FIDELITY NATIONAL TITLE COMPANY -92017-148/

FILED

JUL 1 9 2017

JOHN E. PETALAS LAKE COUNTY AUDITOR 25-FN

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040789

## EXHIBIT "A"

LOT 34 IN WILDWOOD ON THE LAKE, IN THE CITY OF HOBART, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 31 PAGE 44, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

Property Address: 360 S. Virginia St., Hobart, IN 46342 Tax ID No.: 45-09-31-177-011.000-018,





State Form 53395' ATTENTION ESTATE: The Social Security

## INDIANA STATE DEPARTMENT OF HEALTH

Tracking No. 91716

Local No 001662 EDRING 000000512727 1. Dacadent's Logal Name (First, Middle; Last) State No. 024437 CYNTHIA J THOMPSON

5. Social Security Number: 6a. Age: Yrs 

6b. Under, t.Year 

6c. Unde EEMALE: 07:30 PM 11. Facility Name (if Not Institution, Give Street and Number), ST MARY MEDICAL CENTER INC HOBART, IN, 46342 HOBART 360 SOUTH VIRGINIA STREET ⊠ Yes □ No 19. Decedent's Education UNKNOWN JOSEPH PAZDUR This Document is known experty of the Lake County Strengther TERRY THOMPSON 25a. Method Of Dispositio ☐ Burial ☑ Cremation ☐ Donation ☐ En Removal From State Other (Specify): 26. Was Coroner Conta FH10900001 27b. Signature Of Indiana Funeral Selvice Lice CHRISTOPHER CHELBANA 28. Part I. Enter The Chain Of Events - Di Such As Cardiac Arrest, Respiratory Arrest A Line. Add Additional Lines if Necessary Immediate Cause (Final Disease Or Cond Sequentially List Conditions, 'If Any, Leadin Line A. Enter The Underlying Cause (Dise The Events Resulting in Death) Last Part II. Enter Other Significant Conditions Contr ☐ Yes ☐ You The Gause Of Death? ☐ Yes ☐ No METASTATIC SMALL CELL LUNG CANCE
31. Did Tobacco Use Contribute To Death? ☐ Yes - ☑ Probably ☐ No: ☐ Unknown Construction Sac, Restaurant Wooded Area) 37, Injury At Work? 34. Date Of Injury (Month/Day/Year) ooded Area) 37. Injury At Work? 41. Signature, Of Person Certifying Cause Of Death: NEIL KAMAL PURL., 1500.S. LAKE PARK HOBART CHANDANA VAVILALA, VIA ELECTRONIC SIGNATURE