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2017 DEC 28 AM 10:10

MICHAEL B. BROWN
RECORDER

SURVIVORSHIP AFFIDAVIT

STATE OF Indiana
COUNTY OF Lake

File No.: FNW1702608J.
Case No.:

Comes now, Trina Richwalski and Susan Richwalski, who being duly sworn upon their oath, deposes and says:

That, Trina Richwalski aka Trina E. Richwalski and Susan Richwalski aka Susan L. Richwalski are the surviving joint tenants of Lana Stahl, deceased who died domiciled in Porter County, Indiana, on November 4, 2017.

That Trina Richwalski aka Trina E. Richwalski, Susan Richwalski aka Susan L. Richwalski and Lana Stahl acquired title to certain real estate as joint tenants, said real estate being described as follows:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

Affiant states that Trina Richwalski aka Trina E. Richwalski, Susan Richwalski aka Susan L. Richwalski and Lana Stahl continued to hold title as joint tenants continuously from the date they took title to the above described real estate, until the date of Lana Stahl'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 Trina Richwalski aka Trina E. Richwalski and Susan Richwalski aka Susan L. Richwalski, joint tenants.

IN WITNESS WHEREOF, the undersigned have executed this document on December 22, 2017.

Executed: December 22, 2017

Trina E. Richwalski
Signature

Trina Richwalski aka Trina E. Richwalski

Susan L. Richwalski
Signature

Susan Richwalski aka Susan L. Richwalski



STATE OF INDIANA

COUNTY OF LAKE

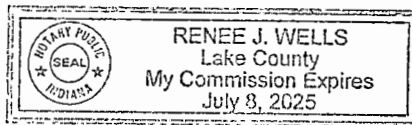
Subscribed and sworn to before me, a Notary Public in and for said county and state, by Trina Richwalski aka Trina E. Richwalski, Susan Richwalski aka Susan L. Richwalski this 22ND day of December, 2017.

Renee J. Wells

Notary Public: Renee J. Wells

Resident of Lake County

My Commission expires: 7-8-25



DEC 27 2017

JOHN E. PETALAS
LAKE COUNTY AUDITOR

**FIDELITY NATIONAL
TITLE COMPANY**

FNW1702608 ✓

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SURVIVORSHIP AFFIDAVIT
(continued)

Prepared by:
Timothy R. Kuiper
Austgen Kuiper Jasaitis P.C.
130 North Main Street, Crown Point, IN 46307

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

Timothy R. Kuiper.

Return to: Trina Richwalski and Susan Richwalski
536 215th St.
Dyer, IN 46311



EXHIBIT "A"
Legal Description

For APN/Parcel ID(s): 45-10-12-253-009.000-034

LOT 3 IN SUBURBAN TERRACE ADDITION TO THE TOWN OF DYER, AS PER PLAT THEREOF RECORDED IN PLAT BOOK 31 PAGE 94, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.





INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

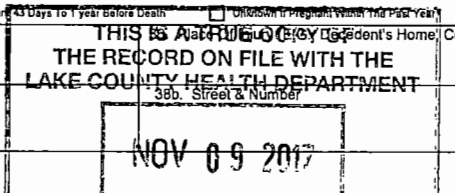
Tracking No. 140255

Local No 003844

EDR No 00000607629

State No 054491

Form fields including: 1. Decedent's Legal Name (LANA L STAHL), 2. Sex (FEMALE), 3. Time Of Death (10:24 PM), 4. Date Of Death (11/04/2017), 5. Social Security Number, 6a. Age - Yrs (73), 7. Date of Birth (12/30/1943), 8. Birthplace (EAST CHICAGO, IN), 10. If Death Occurred In A Hospital (Other (Specify) FAMILY RESIDENCE), 11. Facility Name (4575 EAST 104TH AVENUE), 12. City Or Town, State, And Zip Code (CROWN POINT, IN, 46307), 13. County Of Death (LAKE), 14. Marital Status At Time Of Death (Widowed), 15. Surviving Spouse's Name, 16. Decedent's Usual Occupation (PRODUCTION), 17. Kind Of Business/Industry (FACTORY), 18. Residence - State (INDIANA), 18a. County (LAKE), 18b. City Or Town (DYER), 18c. Street And Number (536 215TH STREET), 18d. Apt. No., 18e. Zip Code (46311), 18f. Inside City Limits? (Yes), 19. Decedent's Education (9TH - 12TH GRADE; NO DIPLOMA), 20. Decedent Of Hispanic Origin (NOT HISPANIC), 21. Decedent's Race (White), 22. Parent's Name (EUGENE WARD), 23. Parent's Name (ELVA WARD), 23a. Parent's Last Name Before First Marriage (ELDRIDGE), 24. Informant's Name (TRINA RICHWALSKI), 24a. Relationship To Decedent (DAUGHTER), 24b. Mailing Address (4575 EAST 104TH AVENUE, CROWN POINT, IN 46307), 25a. Method Of Disposition (Cremation), 25b. Place Of Disposition (HEIGHTS CREMATORY), 25c. Location - City, Town, And State (CHICAGO HEIGHTS, IL), 26. Was Coroner Contacted? (No), 27. Name And Complete Address Of Funeral Facility (CASTLE HILL FUNERAL HOME, 1219 SHEFFIELD AVE, DYER, IN 46311), 27a. Funeral Home License Number (FH10900001), 27b. Signature Of Indiana Funeral Service Licensee (CHRISTOPHER CHELBANA, BY ELECTRONIC SIGNATURE), 27c. License Number (FD20700033), 28. Part I. Enter The Chain Of Events - Diseases, Injuries, Or Complications - That Directly Caused The Death (MALIGNANT NEOPLASM OF LUNG, EMPHYSEMA), 28. Part II. Enter Other Significant Conditions Contributing to Death But Not Resulting In The Underlying Cause (None), 29. Was An Autopsy Performed? (No), 30. Were Autopsy Finding Available To Complete The Cause Of Death? (No), 31. Did Tobacco Use Contribute To Death? (No), 32. If Female: (Not Pregnant Within Past Year), 33. Manner Of Death: (Natural), 34. Date Of Injury (None), 35. Time Of Injury (None), 36. Location Of Injury (None), 37. Injury At Work? (No), 38. Location Of Injury - State (None), 38a. City Or Town (None), 38b. Street & Number (None), 38c. Apt. No. (None), 38d. Zip Code (None), 39. Describe How Injury Occurred (None), 40. If Transportation Injury, Specify: (None), 41. Signature, Of Person Certifying Cause Of Death: (LYLE R MUNN, BY ELECTRONIC SIGNATURE), 42. Certifier (Check Only One): (Certifying Physician), 43. Name, Address And Zip Code Of Person Certifying Cause Of Death: (LYLE R MUNN, 600 SUPERIOR AVENUE, MUNSTER, IN 46321), 44. License Number (01031582A), 45. Date Certified (11/06/2017), 46. Additional Funeral Service Provider: (None), 47. *Asks: (None), 48. Signature of Local Health Officer: (CHANDANA VAVILALA, VIA ELECTRONIC SIGNATURE), 49. For Registrar Only - Date Filed (Month/Day/Year): (NOV 08 2017)



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