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2020-010844

2020 Feb 13 8:50 AM

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
MICHAEL B BROWN
RECORDER

STATE OF INDIANA, COUNTY OF Lake)

SURVIVORSHIP AFFIDAVIT

Sharon L. Petronella, being first duly sworn upon their oath, deposes and says:

1. That they are the surviving spouse of **Robert W. Petronella**, deceased, who died on September 25, 2010, a resident of **Lake County, Indiana**.
2. That the decedent and this affiant were the owners of the following described real estate in **Lake County, Indiana**, as husband and wife:

Lot Forty Five (45), Southwood Estates 2nd Addition to the Town of Griffith, as shown in Plat Book 52, Page 22, in the Office of the Recorder of Lake County, Indiana.

Property Address: **401 North Wright Street, Griffith, IN 46319**

Parcel ID: **45-07-34-404-010.000-006**



3. That said **Sharon L. Petronella** is the surviving spouse of **Robert W. Petronella**, with whom they took title to the above described real estate as husband and wife; and that said marital relationship continued uninterrupted until the date of death of **Robert W. Petronella** on September 25, 2010.
4. Affiant states that the total assets of the estate of the deceased, 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.
5. Affiant makes this Affidavit for the purpose of maintaining a clear record of title and to induce the Auditor of the County in which the real estate is located to cause the within described real estate to be taxed to this Affiant.

FEB 18 2020

**JOHN E. PETALAS
LAKE COUNTY AUDITOR**

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6. That any title insurance company, closing agent, buyer, and/or mortgagee may rely upon the truth of this Affidavit, and I will indemnify and hold them harmless from any loss, including court costs and attorney fees, incurred as a consequence of relying on this Affidavit.

7. Further affiant sayeth naught.

Sharon L. Petronella
Sharon L. Petronella

Before me, the undersigned Notary Public in and for said County and State, personally appeared **Sharon L. Petronella**, being over the age of eighteen (18) years, and acknowledged the execution of the above and foregoing Survivorship Affidavit; and who, having been duly sworn, stated that the facts and matters set forth therein are true and correct.

Witness my hand and Notarial Seal this 29 day of January, 2020

My Commission Expires: 2/1/25



KATIE BANSKE
Notary Public, State of Indiana
Lake County
Commission # 693928
My Commission Expires
February 01, 2025

Document is
NOT OFFICIAL
This Document is the property of
the Lake County Recorder!

Katie Banske, Notary Public
Resident of Lake County, Indiana

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

This instrument prepared by: Terry A. Stauffer, Attorney, 3484 Stellhorn Rd., Ft. Wayne, IN 46815. (260-312-3778)

Grantee's Mailing Address for tax bills: P.O. Box 98 Griffith Indiana 46319

Grantee's street address if different than Mailing Address: 401 N. Wright St. Griffith Indiana 46319

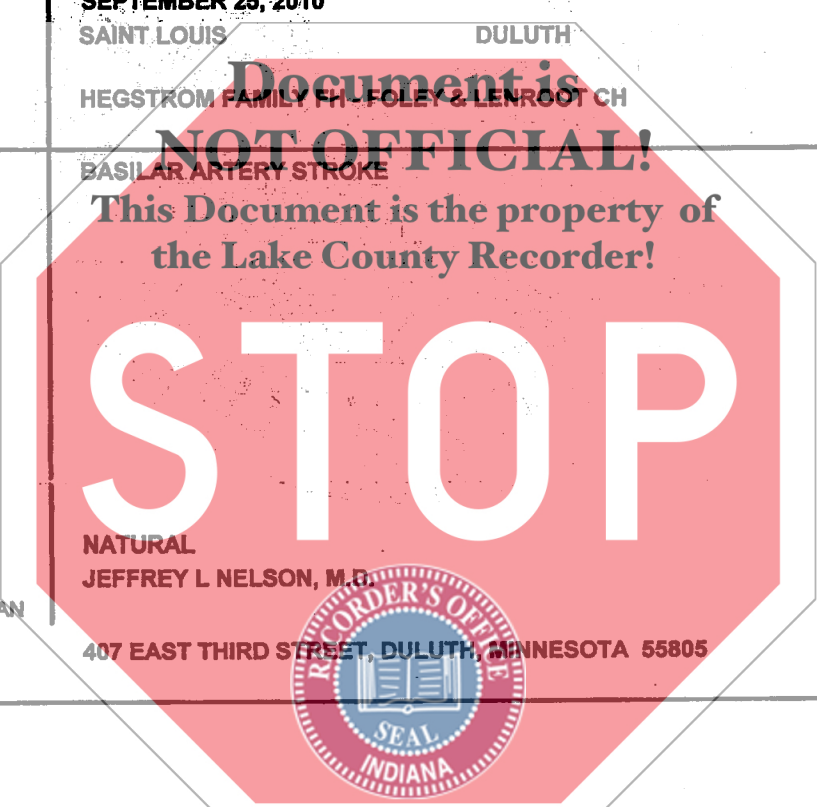


STATE OF MINNESOTA

CERTIFICATION OF VITAL RECORD

DEATH CERTIFICATE

DECEDENT'S NAME	ROBERT WILLIAM PETRONELLA	
DECEDENT'S ALIAS		
SEX, SOCIAL SECURITY NUMBER	MALE	
RESIDENCE (COUNTY AND CITY, STATE)	LAKE	GRIFFITH, INDIANA
DATE AND PLACE OF BIRTH	FEBRUARY 21, 1944	EAST CHICAGO, INDIANA
MARITAL STATUS SPOUSE'S NAME	MARRIED	SHARON LEE SIMMONS
PARENT(S) NAME(S)		
DATE OF DEATH	SEPTEMBER 25, 2010	
PLACE OF DEATH (COUNTY AND CITY)	SAINT LOUIS	DULUTH
FUNERAL HOME	HEGSTROM FAMILY FH FOLEY & LENROOT CH	
CAUSE OF DEATH IMMEDIATE UNDERLYING	BASILAR ARTERY STROKE	
OTHER CONTRIBUTING CONDITIONS		
MANNER CORONER, MEDICAL EXAMINER OR PHYSICIAN	NATURAL JEFFREY L NELSON, M.D.	
	407 EAST THIRD STREET, DULUTH, MINNESOTA 55805	

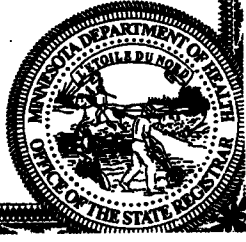


THIS IS A TRUE AND OFFICIAL RECORD OF THE DEATH REGISTERED IN THE OFFICE OF THE STATE REGISTRAR. DATE FILED: SEPTEMBER 27, 2010



PLACE ISSUED: SAINT LOUIS
DATE ISSUED: OCTOBER 05, 2010

Steve Elkins
State Registrar



THIS CERTIFICATION IS VALID ONLY WHEN REPRODUCED ON WATERMARKED SECURITY PAPER WITH A RAISED BORDER AND RAISED STATE SEAL OF MINNESOTA.