## NOT AN OFFICIAL DOCUMENT GINA PIMENTEL

RECORDER STATE OF INDIANA

LAKE COUNTY FILED FOR RECORD

STATE OF INDIANA SS: 2022-007391

2022 Feb 24 8:41 AM

COUNTY OF LAKE

2022 Apr 12

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2022-012756

Mailing address: 3780 Maxwell St., Hobart, IN 46342

This document is being rerecorded for scrienous Error AFFIDAVIT OF SURVIVORSHIP

Comes now Daniel Eaves, and upon being duly sworn does attest and say:

- 1. That the affiant is the son of Joyce Eaves aka Joyce A. Eaves, deceased.
- 2. That Joyce Eaves aka Joyce A. Eaves and Jack G. Eaves aka Jack Gilford Eaves, acquired the following property as Husband and Wife during the term of their marriage.

THE SOUTH HALF OF LOT 37 AND ALL OF LOTS 38 AND 39, BLOCK 4, F.D. BARNES' GARY ADDITION TO HOBART, AS SHOWN IN PLAT BOOK 10, PAGE 27, IN LAKE COUNTY INDIANA

> Commonly known as: 3780 Maxwell St., Hobart, IN 46342 Parcel No.: 45-08-26-228-032.000-018

- 3. That Joyce Eaves aka Joyce A. Eaves and Jack G. Eaves aka Jack Gilford Eaves, remained married until the death of Jack G. Eaves aka Jack Gilford Eaves on the 31st day of August, 2005.
- 4. That Joyce Eaves aka Joyce A. Eaves, became the fee simple owner of the property at the death of Jack G. Eaves aka Jack Gilford Eaves.

I affirm under the penalties for perjury that the forgoing statements are true.

Daniel Eaves

EVECUTED AND DELIVERED BLACK	DDECENICE.	
EXECUTED AND DELIVERED IN MY	12	FILED
Witness Signa		APR 11 2022
Maranda Cinin, Witness Printe	d FILED	JOHN E PETALAS LAKE COUNTY AUDITOR
STATE OF INDIANA )	FEB 23 2022	LAKECOGITT
COUNTY OF LAKE )SS:	AKE COUNTERALAS	
Before me, a notary public in for		
Daniel Faves acknowledged the execution	n of the foregoing or atta	ached Affidavit of Survivorship

as his voluntary act for the purposes stated therein. Witness my hand and Notarial Seal this . 2022.

Notary Signature

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

Shauna M. Lange



This Instrument prepared by: Shauna M. Lange, ESQ REES AND LANGE, P.C. 301 Main Street, Hobart, IN 46342 (219) 947-1692

s voluntary and refusal.*	ST TE: Discl pur lue jur re t there will be	per it fo	1 1	NDIANA	STATE DE	PARTMENT	OF HE	Crack		-17	45
ocal No.	1295-0	15			CERTIFICA	TE OF DEATH		State	No		
				ONFIDENTIAL PE	R IC 16-1, 19-3	2. SEX	-2	Sa. TIME OF DEATH	I SO DATE OF	DEATHMOND,	Day Yr.)
TYPE/PRINT	1. DECEASED - N	AME (FPEL A		Gilford	Eaves	Male		12:47 am	Augus	t 31, 2	2005
ERMANENT BLACK INK			AGE - Last Birthday (Years)	St. UNDER 1 YEAR Months Days	Sc. UNDER I DAY Hours Minutes	e. UNDER I DAY 6. DATE OF BIRTH(Mo. Day, Yr.)  November 03, 19		7.BIRTHPLACE (City and State of Foreign Country Mentone 29 Alabama			
	8. WAS DECEDE	INT	80 YEAR	LAST SERVED IN ARMED FORCES?	HOSPITAL: M Inpat		OTHER	Nursing Home	Other (Specify)	an-Um	all quelle
	No			TEIL	□ ERIC		WN, DR LOCATI	Residence	I se count	OF DEATH	745
	9b. FACILITY NAME (If not institution, give street and number)			Hobart			Lake				
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	(Specify) Married		Joyce Wright			Truck Drive	r			er's L	ocal 14
	134. RESIDENCE	STATE	136. COUN	TY	13c. CITY, TOWN OR LO	CATION	CARA DA	STREET AND NUMBER 180 Maxwe		et	
	Indiana	IN INSIDE CIT	Lake	4. CITIZEN OF	Hobart IS WAS DECEDENT OF P	IISPANIC ORIGIN?	16. RACE-	American Indian,	17 DE	CEDENT'S EDU	CATION
		O No E	2 Yes	WHAT COUNTRY	Mexican, Puerto	Yes (If yes, specify Cuban,	Black, Wh (Specify)	te, etc	(Specify on Elementary/Second		College (1-4 or 5+)
	46342	NO E		SA	Market, Plans		White			8	N/A
	18. FATHER'S NA	ME PPU MAN LA	1.	11000	19. MOTHER'S NAME (First, Middle, Maiden Surname)  Victoria Bonds						
ARENTS	Charley 204 INFORMANT	Eaves	S Privil		206. MAILING	ADDRESS (Street and Munice	or Rural Route	Number, City or Town.	State, Zip Code)	20c. Relat	ionship
FORMANT	Joyce F		1		3780 1	Maxwell Stre	et, Hol	part, IN	46342	Wife	
	218 METHOD OF		Entomb	ment	- marriages	OF DISPOSITION (Name of on	metary, cremetor	r, or 21c	LOCATION - CE	y or Town, State	
		Cremation	Removi	el from State	September	3, 2005 MEMORIAL PAR	CEME	TERV H	obart	Indian	THE REAL PROPERTY.
	Donation 224 EMBALMERS		9		270 EMBALMER'S		23. WAS	DEATH REPORTED T	CORONER?	Indian	
SPOSITION					01009461		100001100	No □ Yes			
							Burns	NAME ADDRESS AND LICENSE NUMBER OF FUNERAL HOME Irns Funeral Home FH83002380 DI E. 7th Street, Hobart, Indiana			
	M	men	7	LVIA	na) FDC	1009461	701 E.	7th Stre	eet, Hoba	46342	lana -
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AUSE OF	resulting in deat	h)	- b		R AS A CONSEQUENCE OF		byyells	والمروالع	elliggill	The state of	للبولك
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