PROB	ATE COURT		C(DUNTÝ, O	HO
ESTATE OF	BETTY LOI BETTY L.	S WALTERS	JUDGE	, DECE	CASED 5
CASE NO	2014 ES 1	0 9			Collina
APPLICA	TION FOR SUM	IMARY RELEA [R.C. 2113.03		DMINISTR	ATION
Applicant states t	that decedent died o	on JANUAR,	1 31, 2014	,	
Decedent's domic	cile was <u>MENNON</u>	MITE MEMORIAL Street Address	HOME 4	110 WEST E	2M 5T.
BLU	FFTON			ALLE	=N °
City or Village, or Town	nship if unincorporated are			Cou	inty
Post Office		OH10 State	· · ·	•	45811
		State			Zip Code
[Check one of the	following]		•		
support u funeral and The application decedent.	inder R.C. 2106.13 ad burial expenses. cant, who is not the s funeral and burial	ue of the assets do: 3(B) plus an amou e surviving spouse, I expenses and the funeral and burial ex	has paid or is	ing \$5,000 fo	or decedent's
Attached hereto is obligation to pay spouse, the prepay	a receipt, contract decedent's funera ment receipt, if app	t or other document	that confirms	applicant is t	he surviving
on attached Form	1.0.	d of kill, legatees at	id devisees kno	own to applica	int, are listed
Applicant states the relief of deceder	at there are no pen at's estate from adm	nding proceedings for ministration under R	or the administ	ration of dece	dent's estate
All known assefs w	vith date of death va	alues of the estate a	re as follows:		
Motor Ve	hicles (include y on number and Cer	year, make, mode rtificate of Title nur	l, body type, nber)	, manufacture	er's vehicle
				\$	
· 				<u> </u>	

	Q ENP	CASI 1: 05	E NO. 2014	ES 10
Z	Accounts maintained by a Financia account's complete identifying nur	al Institution (include finan mber):		
	HUNTINGTON BANK O	2268731766	(2289.19
				S
	Stocks and Bonds (include for earlissuer, the name and address of its or bonds):	ach stock or bond its seri- transfer agent, and the tota	al number, th l number of sl	e name of its
			ŕ	3
			9)
	Real estate described in accompany and Form 12.1 Certificate of Tranvalue.]	sfer and date of death val	ue. [Attach v	erification of
، اسا	Other assets and date of death value	es		
			\$	
Applic	cant requests an order granting summa	ry release.		
Attorne	ey for Applicant	Applicant's Signature	(<u>'l() </u>	·
Typed	or Printed Name	B. SUE OLIVE Applicant's Typed or Pr		
		514 KAREN C	: 7 .	
Street A	Address	Street Address	····	
		FINDLAY	011	45840
City	State Zip Code	City	State	Zip Code
		419-422-74	155	•
Phone N	Jumber (include area code)	Phone Number (include	area code)	<u> </u>
Attorney	Registration No.	•		
Signed	and acknowledged by the applicant in	n my presence this	<u>⊬</u> day of	
- 10 m - 12 m		Mail	De NI	Mar. 1
	MARLA J. MOSES	Notary Public/	Denut Clari-	INJU
	NOTARY PUBLIC, STATE OF OHIO	TAOLAT A E HOHICA	pehnit Cigik	

IN COMMISSION EXPISES TREZUTEOR SUMMARY RELEASE FROM ADMINISTRATION