

(Reverse of Form 5.10)

2020 ES 24

CASE NO. _____

Accounts maintained by a Financial Institution (include financial institution name and the account's complete identifying number):

\$ _____

Stocks and Bonds (include for each stock or bond its serial number, the name of its issuer, the name and address of its transfer agent, and the total number of shares of stocks or bonds):

\$ _____

Real estate described in accompanying Form 12.0 Application for Certificate of Transfer and Form 12.1 Certificate of Transfer and date of death value. [Attach verification of value.] \$ _____

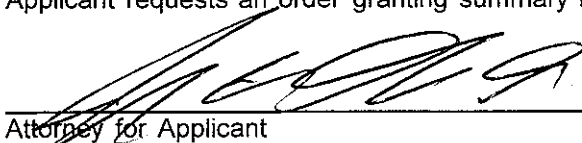
Other assets and date of death values

VFW check 2.50
Nationwide check 33.53

\$ _____

Total Assets \$ 430.03

Applicant requests an order granting summary release.



Attorney for Applicant

James M. Dodson, Jr.

Typed or Printed Name

1417 Shawnee Road

Street Address

Lima, Ohio 45805

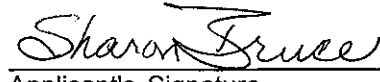
City State Zip Code

(419) 999-9000

Phone Number (Include area code)

Attorney Registration No. 0069059

Signed and acknowledged by the applicant in my presence this 24 day of January, 2020



Applicant's Signature

Sharon Bruce

Applicant's Typed or Printed Name

4160 Ft. Amanda Road

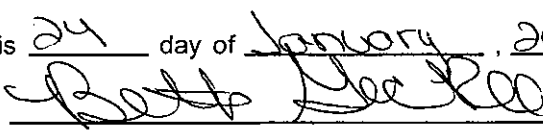
Street Address

Lima, Ohio 45805

City State Zip Code

(419) 303-3746

Phone Number (Include area code)



Notary Public/Deputy Clerk

BETH GECKLE
Notary Public, State of Ohio
My Commission Expires Sept. 25, 2023