PROBATE COURT OF ALLEN COUNTY, OHIO

ESTA	TE OF	MAF	RIAN ROSE METZNER	DECEASED		
Case I	No.	2020 ES 93		PRO		
		APPLICATION FROM	FOR SUMMARY READMINISTRATION [R.C. 2113.031]	LEASE HOUR		
Applica	ınt state	s that decedent died on _	March 26, 2016 .	How the state of t		
Decede	ent's do	micile was <u>436 EAST 3RD</u>	STREET Street Address			
		DELPHOS		ALLEN		
	City	or Village, or Township if uninco	rporated area OH	County 45833		
-		Post Öffice	State	Zip Code		
[Check	cone of	the following]				
	The applicant is decedent's surviving spouse entitled to one hundred percent of the allowance support and decedent's funeral and burial expenses have been prepaid or the surviving spouse has paid or is obligated in writing to pay decedent's funeral and burial expenses and the value of the assets does not exceed the \$40,000 allowance for support under R.C. 2106.13(B) plus an amount not exceeding \$5,000 for decedent's funeral and burial expenses. The applicant, who is not the surviving spouse, has paid or is obligated in writing to pay					
		ent's funeral and burial exp t of decedent's funeral and	enses and the value of the assets burial expenses.	is the lesser of \$5,000 or the		
obligati	on to p		or other document that confirms burial expenses or if the applicant			
	cedent'		of kin, legatees and devisees know	n to applicant, are listed on		
		es that there are no pend ent's estate from administra	ing proceedings for the administra ation under R.C. 2113.03.	tion of decedent's estate or		
All know	wn asse	ets with date of death value	es of the estate are as follows:			
X		Vehicles (include year, n r and Certificate of Title nu	nake, model, body type, manufac mber)	turer's vehicle identification		
	2003 B	uick Rendezvous Serial #3	G5DB03E33S516392, Certificate	\$ 500.00		
	Of Tit	le # 02 0098 1820				

	Accounts maintained by a Financial Institution (include financial institution na complete identifying number):	ame and the account's
		\$
		\$
	Stocks and Bonds (include for each stock or bond its serial number, the name and address of its transfer agent, and the total number of shares of sto	ame of its issuer, the
		\$
		\$
	Real estate described in accompanying Form 12.0 Application for Certificate 12.1 Certificate of Transfer and date of death value. [Attach verification of value]	of Transfer and Form
	Other assets and other date of death values	.
	Other assets and other date of death values	\$
		v
		4
Attorn Andre Typed 321 I Addres Ottav	icant requests an order granting summary release. Applicant Tew D. Knueve Tor Printed Name E. Main St., P. O. Box 303 Wa, OH 45875 Delphos, OH 45833 419-234-7755 Number (Include area code) By Registration No. 0089311	code)
Signe this _	ed and acknowledged by the applicant in day of March, 2020 March, 2020 March, 2020 Motary Public Seputy Clark X Andrew D. Knueve, S. No expiration date	my presence Control Control