## IN THE COURT OF COMMON PLEAS, ALLEN COUNTY, OHIO PROBATE DIVISION

## ESTATE OF <u>DEBORAH L. SAWMILLER aka DEBORAH LUELLA SAWMILLER</u> DECEASED

CASE NO. 2020 ES 129	). 2020 ES 124
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### · APPLICATION TO FILE WILL FOR RECORD ONLY

Applicant states that Decedent died on March 7, 2020			
Decedent's domicile was467 Sandpiper Street			
Liman		Street Address	
Lima	Allen	OH	45801
City/Village/Township	County	State	Zip Code
states that there is no pris being offered for filing  Attorney for Applicant	operty of the Decedent for record purposes o	e's will is attached and offered for which would be subject to probably.  Applicant	or filing. Applicant ite and that the will
_ John M. Leahy	0069519	Dane C. Sawmiller	
Typed or Printed Name and Sup	. Ct. Reg. No.	Typed or Printed Name	
1728 Allentown Road Street Address		467 Sandpiper Street Street Address	
Lima, Ohio 45805 City, State, Zip		Lima, Ohio 45801 City, State, Zip	
419-227-9595 Telephone Number		419-227-0768 Telephone Number	

#### **ENTRY**

A document purporting to be the Last Will and Testament of the above-named Decedent has been filed with this Court. The Court finds that no application for admission to probate has been made.

IT IS HEREBY ORDERED that the document and all related papers be filed for Record Only with the Court; and that upon the filing of any required Ohio Estate Tax Return and the payment of any taxes due, that this proceeding be closed without prejudice.

JUDGE		

# PROBATE COURT OF ALLEN COUNTY, OHIO GLENN H. DERRYBERRY

ESTA	STATE OF DEBORAH L. SAWMILLER  aka DEBORAH LUELLA SAWMILLER		DECEASED		
Case	No.				
		APPLICATION FOR SU FROM ADMINIS	STRATION		
		£		2.2	
Applic	ant state	s that decedent died onMarch 7, 20	<u>20</u> .		
Deced	lent's dor	nicile was <u>467 Sandpiper St.</u>			
		Lima	Street Address	Allen	
	City	or Village, or Township if unincorporated area		County	
		Post Office	Ohio State	45801 Zip Code	
<b>[Chec</b>	k one of	the following]	Otate	Zip Code	
☑ Attach	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 decedent's funeral and burial expenses and the value of the assets is the lesser of \$5,000 or the amount of decedent's funeral and burial expenses.  Suched hereto is a receipt, contract or other document that confirms the applicant's payment or				
obligat	ion to pa	y decedent's funeral and burial expenses eipt, if applicable.	or if the applicant	is the surviving spouse, the	
The de	ecedent's ed Form	surviving spouse, next of kin, legatees an 1.0.	d devisees knowr	n to applicant, are listed on	
Applica relief o	ant states f decede	s that there are no pending proceedings fo nt's estate from administration under R.C.	r the administration 2113.03.	on of decedent's estate or	
All kno	wn asset	s with date of death values of the estate a	re as follows:		
	Motor Vonumber	ehicles (include year, make, model, body and Certificate of Title number)	type, manufacture	er's vehicle identification	
				\$	
				\$	

#### Case No.

	Accounts maintained by a Financial Institution (include financial complete identifying number):	institution name and the account's
		\$
		\$
	Stocks and Bonds (include for each stock or bond its serial numname and address of its transfer agent, and the total number of	ber, the name of its issuer, the shares of stocks or bonds):
		\$
		\$
×	Real estate described in accompanying Form 12.0 Application for 12.1 Certificate of Transfer and date of death value.  [Attach verification of value]	or Certificate of Transfer and Form \$30,100.00
	Other assets and other date of death values	
		\$
		\$
		Total Assets \$30,100.00
Attorne	cant requests an order granting summary release.  Page 1 of Applicant Applicant	c Dun Oa
	M. Meany Dane C. Sar or Printed Name Typed or Printed Name	
1728 A	Allentown Road 467 Sandpig	
Addres	Ohio 45805 Address Lima, Ohiio	45904
	27-9595 419-227-076  Number (include area code) Phone Numb	68 er (include area code)
Attorne	ey Registration No. 0069519	
Signe	ed and acknowledged by the applicant in my presence this	day of
	JOHN M. LEAHY  Notary Public, State of Ohio  My comm. has no expiration	aputy Clerk