## PROBATE COURT OF ALLEN COUNTY, OHIO

| ESTA                | TE OF  | BETTY  | A. NE             | GELSF                   | ACH, A                | KA BET                  | TY ANN N                              | EGELSPA                       | CH DEC                        | EASED                       |
|---------------------|--|--|-------------------|-------------------------|-----------------------|-------------------------|---------------------------------------|-------------------------------|-------------------------------|-----------------------------|
| Case                | No.  | 2020   | ES                | 471                     |                       |                         |                                       |                               |                               |                             |
|                     |  | APPL   |                   |                         | I ADI                 |                         | MARY<br>TRATIC                        |                               | ASE LEN COUR                  | PULLED COLET                |
| Applica             | ant states   | s that deced                                 | dent di           | ied on _                | 01/28/2               | <u>2020         </u> .  |                                       | $\mathbf{Q}$                  |                               | HIO. 48                     |
| Deced               | ent's don  | nicile was <u>1</u>                          | 632 V             | V. Marke                | t Street              | .=                      |                                       |                               | \.                            | 65 <b>6</b>                 |
|                     |  |  | Lim               | а                       |                       |                         | Street Address                        | S                             | Allen 🛝 1                     | #A                          |
|                     | City   | or Village, or T                             |                   |                         | rporated as           | ea                      | · · · · · · · · · · · · · · · · · · · |                               | County                        |                             |
|                     |  | Lin  |                   |                         |                       |                         | Ohio                                  |                               | 45805                         |                             |
|                     | _  | Post C                                       |                   |                         |                       |                         | State                                 |                               | Zip Cod                       | е                           |
| [Checl              | k one of   | the follow                                   | ing]              |                         |                       |                         |                                       |                               |                               |                             |
|                     | 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. |  |                   |                         |                       |                         |                                       |                               |                               |                             |
| X                   | funeral  | olicant, who<br>and burial e<br>nt's funeral | expens            | ses and                 | the value             | ouse, has<br>e of the a | paid or is ob<br>assets is the        | oligated in w<br>lesser of \$ | riting to pay<br>5,000 or the | decedent's e amount of      |
| to pay              | ed hereto<br>deceden<br>, if applic  | it's funeral a                               | t, cont<br>and bu | ract or o<br>irial expe | ther docu<br>enses or | ıment tha<br>if the apı | t confirms th                         | ne applicant<br>surviving s   | 's payment of spouse, the     | or obligation<br>prepayment |
| The de              | ecedent's<br>ed Form   | s surviving :<br>1.0.                        | spous             | e, next                 | of kin, le            | gatees a                | nd devisees                           | known to                      | applicant, a                  | re listed on                |
| Application of dece | ant states<br>edent's e  | s that there<br>state from a                 | are no<br>admini  | pending<br>stration     | g procee<br>under R.  | dings for<br>C. 2113.0  | the administ<br>03.                   | ration of de                  | cedent's es:                  | tate or relief              |
| All kno             | wn asse  | ts with date                                 | of dea            | ath value               | es of the             | estate ar               | e as follows:                         | :                             |                               |                             |
| X                   | Motor \  | /ehicles (ir<br>and Certific                 | nclude<br>cate of | year, r<br>f Title nu   | make, m<br>ımber)     | odel, bo                | dy type, ma                           | anufacturer'                  | s vehicle i                   | dentification               |
|                     | 1986 Au<br>WAUGE   | ıdi 4 dr stat<br>30442GA07                   | ion wa<br>'7797;  | gon mo<br>Title No      | del 5000<br>5. 021324 | S; VIN<br>1862          |                                       | <del></del>                   | \$                            | 2,975.00                    |
|                     |  |  |                   |                         |                       |                         |                                       | ·· <del>·</del>               | \$                            |                             |

|        | Case No. 20   | JZU ES         | 3 4/1         |
|--------|---|----------------|---------------|
|        | Accounts maintained by a Financial Institution (include financial institution name complete identifying number):  | and the        | account's     |
|        |   | <b></b>        |               |
|        | \$  | \$             |               |
| X      | Stocks and Bonds (include for each stock or bond its serial number, the name of it and address of its transfer agent, and the total number of shares of stocks or bor |                | , the name    |
|        | US Savings Bond L410197651EE - face amount \$50.00; value   | \$             | 103.68        |
|        | 9   | 5              |               |
|        | Real estate described in accompanying Form 12.0 Application for Certificate of  |                | and Form      |
|        | 12.1 Certificate of Transfer and date of death value.  [Attach verification of value]   | Tansier        | and Form      |
|        | Other assets and other date of death values   |                |               |
|        | S   | 8              |               |
|        |   | •              |               |
|        |   | P              |               |
|        | Total Assets  | §              | 3,078.68      |
| Appli  | licant requests an order granting summary release.  |                |               |
|        | mey for Applicant  M. Johnson  Noel E. Negelspach   |                | <             |
| Attorn | ney for Applicant Applicant Applicant   | <del>///</del> | <del>-)</del> |
| Jerry  | M. Jöhnson Noel E. Negelspach Typed or Printed Name   |                |               |
| 400 \  | W. North Street 1614 W. Market Street   |                |               |
| Addre  | Address   |                |               |
| Lillia | a, Ohio 45801 Lima, Ohio 45805  | <del></del>    |               |
|        | 222-1040 419-233-3926 Phone Number (include area code)  |                |               |
|        | ey Registration No. 0006509   | e)             |               |
| ,      |   |                |               |
| Signe  |   | $3^{rd}$       | day           |
|        |   | raldso         | M             |
|        | Notary Public, State of Ohio  My Commission Expires  March 10, 2025   |                |               |