PROBATE COURT OF ALLEN COUNTY, OHIO TODD E. KOHLRIESER, JUDGE

APPLICATION FOR SUMMARY RELEASE FROM ADMINISTRATION [R.C. 2113.031] Applicant states that decedent died on August 30, 2019 Decedent's domicile was 204 E. First St., Village Court 2 Apt. Lot 2 Spencerville Street Address Allen City or Village, or Township if unincorporated area Ohio 45887 Fost Office State Zip Code [Check one of the following] The applicant is decedent's surviving spouse entitled to one hundred percent of 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. The applicant, who is not the surviving spouse, has paid or is obligated in writing to pay 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. Attached hereto is a receipt, contract or other document that confirms the applicant's payment or obligation to pay decedent's funeral and burial expenses or if the applicant is the surviving spouse, the prepayment receipt, if applicable. The decedent's surviving spouse, next of kin, legatees and devisees known to applicant, are listed on attached Form 1.0. Applicant states that there are no pending proceedings for the administration of decedent's estate or relief of decedent's estate from administration under R.C. 2113.03. All known assets with date of death values of the estate are as follows: Motor Vehicles (include year, make, model, body type, manufacturer's vehicle identification number and Certificate of Title number) Motor Vehicles (include year, make, model, body type, manufacturer's vehicle identifi	ESTA [*]	TE OF	TIMOTHY DANIEL HUFFMAN AK AKA TIMOTHY I		FFMAN DECE	ASED	
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Case No.

	Accounts maintained by a Financial Institution (include financial institution na complete identifying number):	me 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 stocks.)	
		\$
		\$
	Real estate described in accompanying Form 12.0 Application for Certificate 12.1 Certificate of Transfer and date of death value.	of Transfer and Form
	[Attach verification of value]	\$
	Other assets and other date of death values	
		_ \$
		\$
	Total Assets	\$ \$ 2,000.00
Attorn Melis Typed 973 \ Addres Lima (419)	cant requests an order granting summary release. Ley for Applicant Sea R. Sherrick Or Printed Name W. North St. Ses Ohio 45805 Daniel Eugene Huffma Typed or Printed Name 8583 State Route 219, Address Celina, Ohio 45822 419-733-4686 Phone Number (include area Phone Number (include area	Lot 115
Signe his _	acknowledged by the applicant in day of MeLissa R. SHERRICK, Attorney Notary Public, State of Ohio My Comm. has no exp. date Section 147.03 R.C.	my presence