

PROBATE COURT OF ALLEN COUNTY, OHIO
HON Todd E. Kohlrieser, JUDGE

FILED

JUL 29 2024
TODD E. KOHLRIESER, JUDGE
PROBATE DIVISION
COURT OF COMMON PLEAS
ALLEN COUNTY, OHIO

ESTATE OF Sue W Goldsmith AKA Sue Whedbee Goldsmith DECEASED
CASE NO. 2024 ES 270

APPLICATION FOR SUMMARY RELEASE FROM ADMINISTRATION
[R.C. 2113.031]

Applicant states that decedent died on 05/10/2024
Decedent's domicile was Shawnee Manor
Street Address
2535 Fort Amanda Road Allen
City or Village, or Township if unincorporated area County
Lima OH 45804
Post Office State Zip Code

[Check one of the following]

- The applicant is decedent's surviving spouse entitled to one hundred percent of the allowance for 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.

Attached hereto is a receipt, contract or other document that confirms the applicants 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)

\$

CASE NO. _____

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

Chase Bank Account # 257092517 \$ 3324.62
 _____ \$
 _____ \$

- 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

_____ \$

Total Assets \$ 3324.62

Applicant requests an order granting summary release.

[Handwritten Signature]

Attorney for Applicant

Applicant's Signature

N/A

Daniel L Goldsmith Sr

Typed or Printed Name

Applicant's Typed or Printed Name

Street Address

396 N. Franklin St

City State Zip Code

Street Address

Delaware OH 43015

City State Zip Code

740-215-8913

Phone Number (include area code)

Phone Number (include area code)

Attorney Registration No.

Signed and acknowledged by the applicant in my presence this 17th day of JULY, 2024.

[Handwritten Signature]

Notary Public/Deputy Clerk

