		PROB	ATE	COU	RT OF		ALLEN er	_, JUDG		Ү, ОНІС)
ESTA	TE OF	Carl Herma	n Gest	(aka Ca	arl H. Gest	:)			, DECE	ASED	
CASE	NO	2025	ES	4 5	-						FILE
APPLICATION FOR SUMMARY RELEASE FROM ADMINISTRATION [R.C. 2113.031]											
Applica	ant states	s that dec	edent	died or	n January	3, 2025	5				TODD E. KOHLRIESER. COURT OF COMMON ON ALLEN COMMON ON
Deced	ent's dor	nicile was	2535	E. Blueli		- 4 A dd					ALLEN COUNTY OHIO
Lima					Stre	et Addres	S		Allen		04/0
City or Vi	llage, or To	wnship if unir	corpora	ted area	Ohio				County 45801		
Post Office	е				State				State of Meet Prof	Zip Co	de .
[Check	one of t	he followi	ng]								
×	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.										
Ш	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 de Form 1		surviving	g spou	ise, nex	xt of kin,	legate	es and de	evisees ki	nown to appli	icant, are I	isted on attached
		s that the ate from a						ne admini	istration of de	ecedent's	estate or relief of
All kno	wn asse	ts with da	te of o	death v	alues of	the esta	ate are a	s follows:			
×		ehicles (in			make, m	odel, b	ody type	, manufac	cturer's vehic	le identifica	ation number and
	1986 Tra	vel Trailer -	1ED3	D1828G	4231430				\$ 500.00		
									Φ.		

				CASE	2025 NO.	E\$	4 5			
	Accounts maintain complete identifyin		Institution (include finar	ncial institution	name a	nd the	e account's			
				\$ \$						
	Stocks and Bonds (include for each stock or bond its serial number, the name of its issuer, the name address of its transfer agent, and the total number of shares of stocks or bonds):									
				\$						
				\$						
			g Form 12.0 Application h value. [Attach verific			er and				
	Other assets and o	late of death values								
		-0		\$		<u></u>				
			Total Asse	ets \$ 500.00						
Applic	ant requests an orde	er granting summary	rologeo							
Applic)	er granting summary	Telease.							
K	l .		Dagas	- Llen	+					
Attorne	ey for Applicant		Applicant's Signatur	re			_			
Richard	d W. Miller, III		Deanna M. Gest							
	or Printed Name		Applicant's Typed o	r Printed Name			_			
1728 A	Illentown Rd.		2535 E. Bluelick Rd.							
	Address		Street Address				_			
Lima,	ОН	45805	Lima,	ОН	4	5801				
City	State	Zip Code	City	State	Zip C	ode				
419-22	7-9595		419-302-5295							
	Number (include area	code)	Phone Number (incl	lude area code)	-		_			
	ey Registration No. 000			// day of	FOREUR	1.RV				
Signe 202		by the applicant in	my presence this	day of	1 20 0,	. /				
700	ARY S	RICHARD W. MILLER, Attorney at Law	III Pla	•						
	A Marie Committee of the second	Notary Public, State of C O.R.O. 147.03 No Expiration Date	Notary Public/Dep	outy Clerk						