

PROBATE COURT OF ALLEN COUNTY, OHIO

ESTATE OF GLADYS JEAN JACKSON DECEASED

Case No. 2013-ES-141

APPLICATION FOR SUMMARY RELEASE
FROM ADMINISTRATION

[R.C. 2113.031]

FILED
13 APR -4 PM 4:11
PROBATE COURT
ALLEN COUNTY, OHIO

Applicant states that decedent died on 11-5-2012.

Decedent's domicile was 3500 W. ELM STREET

<u>LIMA</u>	<u>Street Address</u>	<u>ALLEN</u>
City or Village, or Township if unincorporated area		County
<u>LIMA</u>	<u>OHIO</u>	<u>45807</u>
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 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 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)

_____	\$ _____
_____	\$ _____

Case No.

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

\$ _____
\$ _____

- ☐ 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 other date of death values

Life Insurance Policy # ACQ53H7M with Prudential Life Ins. \$ 1,113.00
\$ _____

Total Assets \$ 1,113.00

Applicant requests an order granting summary release.

(X) Attorney for Applicant

ANN E JACOBS

Typed or Printed Name

558 W SPRING STREET

Address

LIMA, OH 45801

419-229-9800

Phone Number (include area code)

Attorney Registration No. (0034200)

Applicant

JEFFERY G JACKSON & JOHN K. JACKSON

Typed or Printed Name

816 EWING | 5200 LOBO STREET

Address

LIMA, OH 45801 | ELIDA, OH 45807

419-222-4447 | 419-339-8555

Phone Number (include area code)

Signed and acknowledged by the applicant in my presence this 2nd day of April, 2013

Mary Margaret Good
Notary Public/Deputy Clerk



MARY MARGARET GOOD
Notary Public, State of Ohio
My Commission Expires
September 26, 2015

FORM 5.10 – APPLICATION FOR SUMMARY RELEASE FROM ADMINISTRATION