

PROBATE COURT OF ALLEN COUNTY, OHIO

ESTATE OF FRANK WADE DINE AKA FRANK W. DINE DECEASED

Case No. 2014ES 356

APPLICATION FOR SUMMARY RELEASE FROM ADMINISTRATION

[R.C. 2113.031]

FILED
PROBATE COURT
14 AUG 14 PM 3:51
ALLEN COUNTY, OHIO

Applicant states that decedent died on 9-7-2013.

Decedent's domicile was 410 S. CABLE RD
Street Address
LIMA ALLEN
City or Village, or Township if unincorporated area County
LIMA OHIO 45805
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)

\$ _____

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] \$ 43,300.00

Other assets and other date of death values

_____ \$ _____
_____ \$ _____

Total Assets \$ 43,300.00

Applicant requests an order granting summary release.

AE 0085467
Attorney for Applicant
Ann E. Jacobs
Typed or Printed Name
558 W Spring St
Address
Lima, Oh 45805
419-229-9800
Phone Number (include area code)
Attorney Registration No. (0034200)

Barbara A. Forest
Applicant
Barbara A. Forest
Typed or Printed Name
410 S. Cable Rd.
Address
Lima, OH 45805
419-225-6763
Phone Number (include area code)

Signed and acknowledged by the applicant in my presence this 14th day of August, 2014

Mary Margaret Good
Notary Public/Deputy Clerk



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