

PROBATE COURT OF ALLEN COUNTY, OHIO

ESTATE OF HENRY L. ALTHOFF AKA HENRY LUTHER ALTHOFF DECEASED

Case No. 2015 ES 202

FILED
PROBATE COURT
15 JUN -4 PM 3:30
CLERK OF PROBATE COURT
ALLEN COUNTY, OHIO

APPLICATION FOR SUMMARY RELEASE
FROM ADMINISTRATION

[R.C. 2113.031]

Applicant states that decedent died on November 19, 2007

Decedent's domicile was 1210 Grant Street
Street Address
Lima Allen
City or Village, or Township if unincorporated area County
Ohio 45801
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] \$ 20,950.00

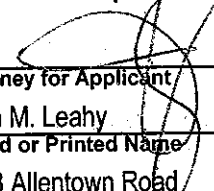
Other assets and other date of death values

_____ \$ _____

_____ \$ _____


Total Assets \$ 20,950.00

Applicant requests an order granting summary release.


Attorney for Applicant
John M. Leahy
Typed or Printed Name
1728 Allentown Road
Address
Lima, Ohio 45805

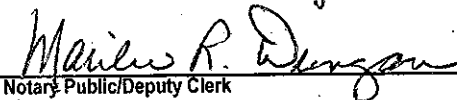
419-227-9595
Phone Number (include area code)

Attorney Registration No. 0069519


Applicant
Phillip S. Messick
Typed or Printed Name
1210 Grant Street
Address
Lima, Ohio 45801

419-778-9013
Phone Number (include area code)

Signed and acknowledged by the applicant in my presence this 3 day of June, 2015


Notary Public/Deputy Clerk



MARILEE R. DUNGAN
Notary Public, State of Ohio
My Commission Expires
October 31, 2015

FORM 5.10 – APPLICATION FOR SUMMARY RELEASE FROM ADMINISTRATION