

PROBATE COURT OF ALLEN COUNTY, OHIO

ESTATE OF AGNES A. EVANS AKA AGNES *Adeline* EVANS DECEASED
 Case No. 2015 ES 247

APPLICATION FOR SUMMARY RELEASE FROM ADMINISTRATION

[R.C. 2113.031]

Applicant states that decedent died on May 3, 2015.

Decedent's domicile was 106 W. Main Street

Elida	Allen
City or Village, or Township if unincorporated area	County
Post Office	Zip Code
OH State	45807 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)
- | | | |
|---|----|----------|
| 2002 Honda Accord Sedan, VIN 1HGCG56762A100487, | \$ | 3,597.00 |
| Title No. 02 00989017 | \$ | |

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- ☐ 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

_____ \$ _____
 _____ \$ _____

Total Assets \$ 3,597.00

Applicant requests an order granting summary release.

Attorney for Applicant

John M. Leahy
 Typed or Printed Name

1728 Allentown Road
 Address

Lima, OH 45805

419-227-9595

Phone Number (include area code)

Attorney Registration No. 0069519

Applicant

Paul L. Evans

Typed or Printed Name

106 W. Main Street

Address

Elida, OH 45807

419-339-4406 or 419-235-2263

Phone Number (include area code)

Signed and acknowledged by the applicant in my presence this 15th day of July, 2015


 Notary Public/Deputy Clerk

Ashley B. Stripe

State of Ohio

Van Wert County

Commission Expires August 22, 2017