PROBATE COURT OF A // E 1) Colon 17. Perry Ber 1500GI	COUNTY, OHIO
ESTATE OF LACTYGOND DOUS	, DECEASÉD
CASE NO. <u>2015 E S 352</u>	The state of the s
APPLICATION FOR SUMMARY RELEASE FROM [R.C. 2113.031]	M ADMINISTRATION
Applicant states that decedent died on Avg. 4th 2015	
Decedent's domicile was 852 w Murphy St	
Linna.	Allen °
City or Village, or Township if unincorporated area	County 45804
Post Office State	Zip Code
[Check one of the following]	
allowance for support and decedent's funeral and burial effects the surviving spouse has paid or is obligated in writing burial expenses and the value of the assets does not exceed support under R.C. 2106.13(B) plus an amount not exceed funeral and burial expenses.	to pay decedent's funeral and eed the \$40,000 allowance for seeding \$5,000 for decedent's
The applicant, who is not the surviving spouse, has paid or decedent's funeral and burial expenses and the value of the or the amount of decedent's funeral and burial expenses.	r is obligated in writing to pay e assets is the lesser of \$5,000
Attached hereto is a receipt, contract or other document that confir obligation to pay decedent's funeral and burial expenses or if t spouse, the prepayment receipt, if applicable.	ms the applicant's payment or the applicant is the surviving
The decedent's surviving spouse, next of kin, legatees and devisees on attached Form 1.0.	known to applicant, are listed
Applicant states that there are no pending proceedings for the admi or relief of decedent's estate from administration under R.C. 2113.0	nistration of decedent's estate 3.
All known assets with date of death values of the estate are as follow	vs:
Motor Vehicles (include year, make, model, body tidentification number and Certificate of Title number)	ype, manufacturer's vehicle
1991 FORD TAURUS	\$ 1494.00

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 date of death values  Total Assets  Total Assets  Applicant requests an order granting summary release.  Attorney for Applicant  Applicant's Typed or Printed Name  Street Address  Street Address  Street Address
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 date of death values  Total Assets  Total Assets  Total Assets  Applicant requests an order granting summary release.  Applicant's Signature  Applicant's Typed or Printed Name  Typed or Printed Name
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 date of death values  Total Assets  Total Assets  Total Assets  Total Assets  Applicant requests an order granting summary release.  Applicant Signature  Applicant's Typed or Printed Name  Applicant's Typed or Printed Name  Typed or Printed Name
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 date of death values  Total Assets  Applicant requests an order granting summary release.  Attorney for Applicant  Typed or Printed Name  Typed or Printed Name  Applicant's Typed or Printed Name  Typed or Printed Name
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 date of death values  Total Assets  Applicant requests an order granting summary release.  Attorney for Applicant  Typed or Printed Name  Typed or Printed Name  Applicant's Typed or Printed Name  Typed or Printed Name
Applicant requests an order granting summary release.  Applicant requests an order granting summary release.  Attorney for Applicant  Typed or Printed Name  Applicant's Typed or Printed Name  Typed or Printed Name  Applicant's Typed or Printed Name
Applicant requests an order granting summary release.  Attorney for Applicant  Typed or Printed Name  And Form 12.1 Certificate of Transfer and date of death value. [Attach verification of Name of the Name of t
and Form 12.1 Certificate of Transfer and date of death value. [Attach verification of value.]    N/A
and Form 12.1 Certificate of Transfer and date of death value. [Attach verification of value.]    N/A
Applicant requests an order granting summary release.  Attorney for Applicant  Applicant's Signature  Applicant's Typed or Printed Name  Applicant's Typed or Printed Name  Applicant's Typed or Printed Name
Applicant requests an order granting summary release.  Attorney for Applicant  Applicant's Signature  Monca Ellott  Applicant's Typed or Printed Name  Applicant's Typed or Printed Name  Bar Wall Ellott
Applicant requests an order granting summary release.  Attorney for Applicant  Applicant's Signature  Monca Ellott  Applicant's Typed or Printed Name  Applicant's Typed or Printed Name  Bar Wall Ellott
Applicant requests an order granting summary release.  Attorney for Applicant  Applicant's Signature  Monco Elleott  Applicant's Signature  Applicant's Typed or Printed Name  Barry Release.
Applicant requests an order granting summary release.  Attorney for Applicant  Applicant's Signature  Monca Ellott  Applicant's Typed or Printed Name  Applicant's Typed or Printed Name  Bar Wall Ellott
Attorney for Applicant  Applicant's Signature  Monica Elleott  Applicant's Typed or Printed Name  Applicant's Typed or Printed Name  South Applicant's Typed or Printed Name
Attorney for Applicant  Applicant's Signature  Monca Elleott  Applicant's Signature  Applicant's Typed or Printed Name  Barry Applicant's Typed or Printed Name  Barry Applicant's Typed or Printed Name
Typed or Printed Name  Monica E/1077  Applicant's Typed or Printed Name  552 W 700 E 16 H)
Typed or Printed Name  Monica E/1077  Applicant's Typed or Printed Name  SSW 900. E 16+105
= 852 w 920. € 16+DS
Street Address Street Address
1 mg 2 // 1/5 // 1/5 //
City State Zip Code City State Zip Code
4/4-204-3210
Phone Number (include area code)  Phone Number (include area code)
Attorney Registration No.
Signed and acknowledged by the applicant in my presence this 1511 day of 2015
Notary Public Deputy Werk