PROBATE COURT OF Allen COUNTY, OHIO
GIENN H. DERLYBESTOBGE
ESTATE OF Karen Miller, DECEASED 3
CASE NO. 2015 ES 93 (No Middle NAME)
APPLICATION FOR SUMMARY RELEASE FROM ADMINISTRATION [R.C. 2113.031]
Applicant states that decedent died on 9-10-14
Decedent's domicile was 625 W. Spring St Lima of 4580 City or Village, or Township if unincorporated area Post Office State State Allen County 4580 Zip Code
[Check one of the following]
The applicant is decedent's surviving spouse entitled to one hundred percent of the allowance for 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 relief of decedent's estate from administration under R.C. 2113.03.
.ll 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) 1999 Pontiac Grand Am 4D \$ 4950.00
The state of the s

		CASE NO
	Accounts maintained by a Financia account's complete identifying nur	al Institution (include financial institution name and the nber):
		\$
		\$
	Stocks and Bonds (include for earssuer, the name and address of its or bonds):	transfer agent, and the total number of shares of stocks
•		· · · · · · · · · · · · · · · · · · ·
	Real estate described in accompany and Form 12.1 Certificate of Transvalue.]	ving Form 12.0 Application for Certificate of Transfer sfer and date of death value. [Attach verification of
	Other assets and date of death value	s
		\$ -
		Total Assets \$ - SAhinge 7.46
		Total Assets \$ -
Applic	cant requests an order granting summa	ry release.
		Ma 1 Chala
Attorne	ey for Applicant	Applicant's Signature
		Chad Eberle
Typed	or Printed Name	Applicant's Typed or Printed Name
		209. W Hardin St
Street A	Address	Street Address
		Findlay OH 45840
City	State Zip Code	City State Zip Code 419-220-8475
Phone N	Number (include area code)	Phone Number (include area code)
Δ ftornes	y Registration No.	
rttorno	y Rogistiation No.	
C:1		11.74
51gnad	and acknowledged by the applicant in	my presence this day of
— <i>v y</i>	,	Sana W Wullerson
		Notary Public/Deputy Clerk