

PROBATE COURT OF Allen COUNTY, OHIO, JUDGE

FILED
PROBATE COURT
15 MAR 25 PM 1:00
ALLEN COUNTY, OHIO
CLERK OF PROBATE COURT

ESTATE OF Tom A Augsburger aka Tom Allen Augsburger, DECEASED

CASE NO. 2016 ES 115

APPLICATION FOR SUMMARY RELEASE FROM ADMINISTRATION
[R.C. 2113.031]

Applicant states that decedent died on March 15th 2016

Decedent's domicile was 1515 N Metcalf St
Street Address

Lima
City or Village, or Township if unincorporated area

Allen
County

Lima OH 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 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 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)

96 GMC Sonoma Ext. Cab Vin # 1GTC519X8T8507313 \$ 1730.00
\$

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Accounts maintained by a Financial Institution (include financial institution name and the account's complete identifying number):

Checking, Fifth Third Bank, #0031796259 \$ 1703.57
 Savings, Superior FCU, #000070231 \$ 25.91

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 \$ 3459.48

Applicant requests an order granting summary release.

~~_____
 Attorney for Applicant

 Typed or Printed Name


 Street Address

 City State Zip Code

 Phone Number (include area code)

 Attorney Registration No. _____~~

Andrew Augsburg
 Applicant's Signature
ANDREW AUGSBURGER
 Applicant's Typed or Printed Name
1187 BAY CIRCLE
 Street Address
Lima OH 45801
 City State Zip Code
(419) 235-7717
 Phone Number (include area code)

Signed and acknowledged by the applicant in my presence this 25 day of March, 2016

ANGELA D. COX
 Notary Public, State of Ohio
 My Commission Expires July 06, 2019
[Signature]
 Notary Public/Deputy Clerk
 FORM 5.10 - APPLICATION FOR SUMMARY RELEASE FROM ADMINISTRATION