

PROBATE COURT OF Allen COUNTY, OHIO  
Glenn H. Derryberry JUDGE

PROBATE COURT  
16 JUL 21 PM 2:57  
ALLEN COUNTY, OHIO

ESTATE OF Keith A. McBeth, DECEASED

CASE NO. 2016 ES 274

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

Applicant states that decedent died on November 10, 2015

Decedent's domicile was 13695 CT. RD. 21  
Street Address

Harrod  
City or Village, or Township if unincorporated area

Allen  
County

Post Office Ohio State 45850 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)

<u>1997 Oldsmobile Achieva 4D Sedan</u>	\$	<u>1558.00</u>
<u>1G3NL52T0VM315155 02 0107 9449</u>	\$	

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CLERK OF PROBATE COURT  
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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 date of death values  
\$ \_\_\_\_\_

Total Assets \$ \_\_\_\_\_

Applicant requests an order granting summary release.

\_\_\_\_\_  
Attorney for Applicant

*Lindsay Hooks*  
Applicant's Signature

\_\_\_\_\_  
Typed or Printed Name

Lindsay Hooks  
Applicant's Typed or Printed Name

\_\_\_\_\_  
Street Address

215 N. Seriff Dr  
Street Address

\_\_\_\_\_  
City State Zip Code

Elida OH 45807  
City State Zip Code

\_\_\_\_\_  
Phone Number (include area code)

419 302 5832  
Phone Number (include area code)

\_\_\_\_\_  
Attorney Registration No.

Signed and acknowledged by the applicant in my presence this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public/Deputy Clerk