PROBATE COURT OF ALLEN COUNTY, OHIO GLENN H. DERRYBERRY

ESTA	TE OF	IMA JEAN BAD	DERTSCHER	DECEASED		
Case	No. 2016	ES 340				
	•					
	APP	LICATION FOR S	SUMMARY RE	LEASE =		
		FROM ADMI	VISTRATION	16 SET		
		[R.C. 21	13.031]	P-0		
Annlic	ant states that do	cedent died onJune 4, 2	2046	PA		
		s <u>410 W. Elm St. (Mennonite</u>		#		
Decee	citt's dofflione wa	Bluffton	Street Address	Allen Ed		
	City or Village,	or Township if unincorporated area		Allen County		
 -	Po	st Office	Ohio State	45817 Zip Code		
[Chec	k one of the follo		Otato	Zip Gode		
×	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.					
	decedent's fune	tho is not the surviving spouseral and burial expenses and the dent's funeral and burial expe	he value of the assets i	ed in writing to pay s the lesser of \$5,000 or the		
obligat	ed hereto is a rec tion to pay decede ment receipt, if a	eipt, contract or other docum ent's funeral and burial expen pplicable.	ent that confirms the ar ses or if the applicant is	oplicant's payment or s the surviving spouse, the		
The de	ecedent's survivin ed Form 1.0.	g spouse, next of kin, legatee	es and devisees known	to applicant, are listed on		
Applicated relief of	ant states that the	ere are no pending proceeding te from administration under	gs for the administration R.C. 2113.03.	of decedent's estate or		
All kno	wn assets with da	ate of death values of the esta	ate are as follows:			
	Motor Vehicles (number and Cer	include year, make, model, b tificate of Title number)	ody type, manufacturer	's vehicle identification		
				\$		

FORM 5.10 - APPLICATION FOR SUMMARY RELEASE FROM ADMINISTRATION Purities Springs Software

3/1/2008

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×	Accounts maintained by a Financial Institution (include financial institution name and the account complete identifying number):				
	CNB-1	\$	1,559.38		
		\$			
	Stocks and Bonds (include for each stock or bond its serial number, the name and address of its transfer agent, and the total number of shares of	ame of its is	suer, the onds):		
		\$			
		\$			
	Real estate described in accompanying Form 12.0 Application for Certificate 12.1 Certificate of Transfer and date of death value. [Attach verification of value]	ate of Transt	er and Form		
	Other assets and other date of death values	Ψ			
		\$			
	FG	* \$			
	Total Ass	sets \$	1,559.38		
Attorn Roger Typed	cant requests an order granting summary release. L. Rader Or Printed Name L. Hardin St. L. Hardin St.		30-her		
Addre	Address	inte Memorial)			
(419)	422-5387 (419) 358-1015 Number (include area code) (419) 45817	area code)			
Attorn	ey Registration No. 0008680				
Sign	Notary Public/Deput Nork	Augu Augu	\geq		
	MOTARY PUB	R, ATTORNEY AT 1 LIC - STATE OF OI Has No Expiration in 147.03 R.C.	110		