PROBATE COURT OF ALLEN COUNTY, OHIO GLENN H. DERRYBERRY, JUDGE

		^					PA	ORILL	ED
EST	ATE OF _	1Jarr	<u>y 1 - </u>	<u>Rene</u>	Mil	er	17 10	08AIL	CEASED
CAS	e.ΝΟ ₂₀₁₇	ES_	15_				GLENN.	' / J AA	111:56 HIO ^{UUGE}
	API	PLICATIO	ON FOR	SUMMARY REL [R.C. 2113		ROM A	DMINISTR	ATION	HIO OUGE
Applio	cant states	that dece	dent died	on Nov 23	2016				·
Dece	dent's dom	iicile was _	<i>3</i> 85a	Allentown Street Add				·	·
	Lima							A	len
City or	Village, or T	ownship if ur	nincorporate	ed area			*******	Co	unty
				OH				45	807
Post O	ffice			State				Zip	Code
[Chec	k one of th	ne following	g]						
×	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 and 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.								
obliga	hed hereto ation to pay repayment	y decedent	's funeral	ct or other docume and burial expense.	ent that co ses or if th	onfirms tl ne applic	ne applicant' ant is the su	s payme rviving s	ent or spouse,
The d	lecedent's ned Form ′	surviving s	spouse, n	ext of kin, legatee	s and dev	risees kn	own to appli	cant, are	e listed on
Applic or reli	cant states ief of dece	that there	are no po ite from a	ending proceeding dministration unde	s for the er R.C. 21	administ 13.03.	ration of the	decede	nt's estate
All kn	own asset	s with date	of death	values or the esta	ate are as	follows:			
X	number	ehicles (inc and Certifi רסץ לפ לאב 15	cate of Ti	r, make, model, bottle number) T YTARN 91140 34445124173	72052	650	020131		fication 8 150. 00 6 50.00
	1985 Do	9		37 FD 14H7 F55				 \$	150.00
	1993 Dec			THE 16/8/2127		02 1012 02 0115		⊅ ≉	150.00

	Accounts maintained by a Financial Institution account's complete identifying number):	itution (include financial institution name and the						
	account's complete identifying number).							
		ck or bond its serial number, the name of its issuer the and the total number of shares of stocks or bonds).						
		\$ 100 to						
		\$\$						
	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							
		\$ <u>O</u>						
		Total Assets \$ / /00.						
Appli	cant requests an order granting summary i	release.						
Attorne	ey for Applicant	Applicant's Signature						
		Justin R Miller						
Typed	or Printed Name	Applicant's Typed or Printed Name						
Street	: Address	3852 Allentown Rd Street Address						
		City State Zip Code						
City	State Zip Code	· · ·						
Phone	e Number (include area code)	<u>567-712 - 1778</u> Phone Number (include area code)						
Attorr	ney Registration No							
Signe	ed and acknowledged by the applicant in m	ny presence this 13 day of January,						
ور اول	ገ							
<u></u>	— CYNTH	JA A FREELAND Public, State of Ohio Chuke Ox Tracken						
		ion Expires May 3, 20 Watery Public/Deputy Clerk						