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

ESTATE OF	DONALD JUSTIN SADLER aka DONALD J. SADLER	A COUNT DECEMBED
	2019 ES349	Trohibuog ?

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

Applicant states that decedent died on		06/30/2019				
Decede	nt's domicile was	3500 W. Elm Street, Apt. 1 Street Address	04			
	Lima		Allen			
	City or Village, or Township if unincorporated are	е а	County			
	Post Office	Ohio State	45807 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 \$5,000.00 for decedent's funeral and burial expenses.					
	The applicant, who is not the surviving spaneral and burial expenses and the value decedent's funeral and burial expenses.	ne surviving spouse, has paid or is obligated in writing to pay decedent's and the value of the assets is the lesser of \$5,000.00 or the amount of I expenses.				
to pay	ed hereto is a receipt, contract or other do- decedent's funeral and burial expenses o if applicable.	cument that confirms the ap or if the applicant is the surv	oplicant's payment or obligation riving spouse, the pre-payment			
	cedent's surviving spouse, next of kin, leg d Form 1.0.	gatees, and devisees known	to applicant, are listed on the			
Applica decede	nt states that there are no pending procee nt's estate from administration under R. C.	edings for the administration 2113.03.	of decedent's estate or relief of			
All knov	wn assets with date of death values of the e	estate are as follows:				
	Motor Vehicles (include year, make, mode and Certificate of Title number):	el, body type, manufacturer's	s vehicle identification number			
			\$			
			\$			

	CASE NO							
	Accounts maintained by a Financial Institution (include financial institution name and the account's compleidentifying number):							
					_\$			
					_\$			
				bond its serial number, the name of its iss per of shares of stocks or bonds):	uer, th	ne name and		
					_\$			
					\$			
				n 12.0 Application for Certificate of Trans [Attach verification of value.]	fer an	d Form 12.1		
\boxtimes	Other assets	and date of deat	n values		-			
	ntial Insurance	Company - Lor	ng Term Care Po	licy - refund check				
	<u></u>				_\$	3,410.40		
					_\$			
		·		Total Assets	\$	3,410.40		
huf sh	Mentelh	rder granting sur	minary roloudes.	Alberta Le	-			
Attorney	for Applicant			Applicant's Signature				
Robert	J. Meredith			Alberta Lee				
Typed or	Printed Name			Applicant's Typed or Printed Name				
101 N. Elizabeth Street, 6th Floor Street Address			3500 W. Elm Street, Apt. 104 Street Address					
	Lima	Ohio	45801	<u>Lima</u> Ohio		45807		
	City	State	Zip Code	City State		Zip Code		
Phone Ni	(4] umber (include area	9) 228-9746	<u> </u>	(419) 204-8801 Phone Number (include area code)				
	Registration No	0040	681	,,				
Attorney	negistration ivo			e this 18th/ day of Scotemb	~ ~	2019		
Signed	and acknowledg	ged by the applic	ant in my presend	e this 10 day of 30 tomb	ur	<u>, WUII</u> .		
1		AMANDA R. GOO		e this 18th/day of September Amanda R. Good	رائم م			
(Notary Public, Sta My Commission E		Notary Public/Deputy Clerk	VV 11			
•	(A)	March 7, 2020		Hotaly I dollar Dopaly Cloth				