Form IH-7SF SF# 18300 (R2/04-07)				
STATE OF INDIANA		IN THE	COUNTY	COURT
COUNTY OF)SS:)	CAUSE NO		
IN THE MATTER OF THE ESTATE OF)		
		, DECEASED)		

Prescribed by the Indiana Department of Revenue

REPORT OF APPRAISER

I, the undersigned appraiser, have investigated the facts concerning taxable transfers made by the decedent before his death, reviewed the Schedule of All Property filed with this Court for mistakes and omissions, and appraised each property interest, transferred by the decedent under a taxable transfer, at its fair market value as of the date of the decedent's death. It appears that the decedent died a legal resident of _____ County, Indiana, on the _____ day of _____, 20 ____.

After completion of the above duties assigned to me, it is my opinion, from all of the facts available to me at this time, that the Schedule of All Property previously filed with this court on the _____ day of _____, 20 _____, correctly lists each property interest transferred by the decedent under a taxable transfer, and correctly indicates the fair market value of such property interests as of the date of the decedent's death, and is hereby incorporated within this report by reference.

On the _____ day of ______, 20_____, prior to making the above appraisal, I gave notice by mail, postage prepaid, to each person who filed a request for notice under the parameters set by Ind. Code § 6-4.1-5-3. Individuals provided notice are set forth by separate distribution list, if applicable.

All of which is respectfully submitted this _____ day of ______, 20____.

County Assessor/Appraiser

Ву:_____

Distribution: