

UNOFFICIAL COPY

STATE OF ILLINOIS)
) SS.
COUNTY OF COOK)

0010040381

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2001-01-17 15:39:34
Cook County Recorder 23.50

DECEASED JOINT TENANCY AFFIDAVIT

RONALD K. KEIM, hereinafter referred to as the Affiant, states under oath that the Affiant resides at 805 S. Benton Street, in the City of Palatine, Illinois, that the Affiant was acquainted with HELEN MILLER, the Decedent; that at the time of death, the Decedent was one of the owners of the property, by virtue of a properly recorded joint tenancy warranty deed, said property, located at 1805-07 North Paulaski in Chicago, Cook County, Illinois, 60639, and legally described as follows:

LOTS 20 AND 21, BLOCK 4 OF ROBERT F. SUMMERS SUBDIVISION OF THE WEST HALF OF THE NORTH WEST QUARTER OF THE SOUTH WEST QUARTER OF SECTION 35, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

P.I.N. 13-35-307-018-0000 & 13-35-307-019-0000

That the Decedent had no interest in any business or partnership, nor held any power of appointment at death, nor created any remainder interests in property by transfer with retention of a life interest therein or the creation of interests to take effect in possession or enjoyment after death.

That the Decedent died on December 16, 1978, as evidenced by the attached death certificate, leaving no/a last will and testament,.

That the total value of decedent's estate, including the taxable interest in the above property was \$ 17,000 and that the value of the above property individually was \$ 35,000.

That the Illinois Inheritance Tax and the Federal Estate Tax, if any was due from the Decedent's estate has been paid in full.

That the Affiant makes this Affidavit to induce the title company to issue its policy of title insurance on the above described property.

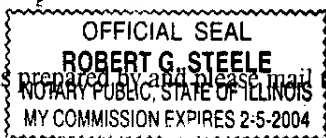
The Affiant hereby covenants and agrees, for himself, heirs, personal representative or assigns, to forever fully indemnify, protect, defend and hold the title company harmless and to reimburse the Fund for all loss, costs, damages, suits, attorney's fees and expenses of every kind and nature which the title company may suffer, expend or incur by reason of the issuance of said policy free and clear of the following objections:

1. Claims against the estate of HELEN MILLER, the Decedent.
2. Illinois State Inheritance Tax and Federal Estate Tax which may be charged against the estate of said Decedent.
3. Legacies, if any, created by the Will of said Decedent.
4. Rights to contribution.

Ronald K. Keim (SEAL)
RONALD K. KEIM

Subscribed and sworn to before me
this 21st day of December, 2000.

Robert G. Steele
Notary Public



This Instrument was prepared by and please mail to: ROBERT G. STEELE, 3413 N. LINCOLN, CHICAGO, IL 60657



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ATGF, INC.

I, DAVID ORR, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County, do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.

IN WITNESS THEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the City of Chicago, in said County.

David Orr
COUNTY CLERK

0010040381

DECEASED'S BIRTH NO.		REGISTRATION DISTRICT NO. 16.0	STATE OF ILLINOIS		STATE FILE NUMBER 03586		
REGISTERED NUMBER		MEDICAL CERTIFICATE OF DEATH					
DECEASED - NAME		FIRST	MIDDLE	LAST	SEX	DATE OF DEATH	MONTH DAY YEAR
1. HELEN		MILLER		MILLER	FEMALE	DECEMBER 16, 1978	
RACE - (WHITE, BLACK, MEXICAN, INDIAN, ETC.)		ETHNIC OR DESCENT		AGE - LAST BIRTHDAY (YRS)	UNDER 1 YEAR	UNDER 1 DAY	DATE OF BIRTH (MO., DAY, YEAR)
4a. WHITE		4b. POLISH		5a. 63	5b.	5c.	6. JULY 9, 1915
CITY, TOWN, VILLAGE OR NEIGHBORHOOD		HOSPITAL OR OTHER INSTITUTION - NAME OF HOSPITAL, DRIVE, STREET AND NUMBER			IF HOSP. OR INST. INDICATE DEPT., OFFICE, INC. DEPARTMENT (SIC) ETC.		
7b. PARK RIDGE		LUTHERAN GENERAL HOSPITAL			INPATIENT		
STATE OF BIRTH (IF NOT IN U.S.A. GIVE COUNTRY)		CITIZEN OF WHAT COUNTRY		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SIC)		NAME OF SURVIVING SPOUSE (MARRIED MAN L. IF WIFE)	
8. ILLINOIS		9. UNITED STATES		10. MARRIED		11. CHESTER MILLER	
SOCIAL SECURITY NUMBER		OCCUPATION		KIND OF BUSINESS OR INDUSTRY		1. WAR VETERAN (SIC)	
12. 349-09-6756		13. HOUSEWIFE		13b. OWN HOME		13c. NO	
RESIDENCE STREET AND NUMBER		CITY		INSIDE CITY (YES/NO)	COUNTY	STATE	
14a. 6755 NORTH LOCKWOOD		14b. INCOLNWOOD		YES	COOK	ILLINOIS	
FATHER - NAME		MOTHER - MAIDEN NAME					
15. JOHN		16. ANTONIA					
INFORMANT'S SIGNATURE		RELATIONSHIP		MAILING ADDRESS (STREET AND NO. OR R.F.D. CITY OR TOWN STATE ZIP)			
17a. ADMITTING CLERK		IBOS. REC.		18775 DEMPSTER ST., PARK RIDGE, ILLINOIS 60068			
18. DEATH WAS CAUSED BY		[ENTER ONE OF 3 CAUSES PER LINE FOR (A), (B), AND (C)]				APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
PART I. IMMEDIATE CAUSE		(a) Cardiorespiratory arrest				1 hour	
CONDITIONS, IF ANY, WHICH GIVE RISE TO IMMEDIATE CAUSE (IN STATING THE UNDERLYING CAUSE LAST)		(b) Acute myocardial infarct				4 weeks	
PART II. OTHER SIGNIFICANT CONDITIONS		CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN (A, B, OR C)				19a. NO	
DATE OF OPERATION (IF ANY)		MAJOR FINDINGS OF OPERATION					
20a.		20b.					
I ATTENDED THE DECEASED FROM		TO		AND LAST SAW HIM/her ALIVE ON		HOUR OF DEATH	
21a. May 178		21b. 12/16/78		21c. 12/18/78		21d. 11:58 PM	
22a. SIGNATURE		DATE SIGNED				ILLINOIS LICENSE NUMBER	
22b. C. Paik, M.D.		22c. DEC. 17, 1978				22d. 36-43115	
NAME AND ADDRESS OF CERTIFIER		NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER MUST BE NOTIFIED					
23. CHONG HAU PAIK M.D., 2 N. TALCOTT, PARK RIDGE, ILL. 60063							
BURIAL CREMATION REMOVAL (SPECIFY)		CREMETARY OR CREMATORY - NAME		LOCATION		DATE (MONTH DAY YEAR)	
24a. CREMATION		24b. ACACIA PARK		24c. NORWOOD PARK ILLINOIS		24d. DEC. 19, 1978	
FUNERAL HOME		STREET AND NUMBER OR R.F.D.		CITY OF TOWN		STATE	
25a. DRAKE & SON, INC.		625 BUSSE HWY.		PARK RIDGE ILLINOIS		60068	
FUNERAL DIRECTOR'S SIGNATURE		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER					
25b. John B. Hall, M.D.		25c. 7930					
LOCAL REGISTRAR'S SIGNATURE		DATE RECD BY LOCAL REGISTRAR (MONTH DAY YEAR)					
26a. JOHN B. HALL, M.D.		26b. Dec 18, 1978					

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