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2001-06-07 11:31:56  
Cook County Recorder 23.50

STATE OF ILLINOIS )  
                          ) SS.  
COUNTY OF COOK )

## DECEASED JOINT TENANCY AFFIDAVIT



BIRUTA WALTERS, hereinafter referred to as the Affiant, states under oath that the Affiant resides at 2240 West North Avenue, in the City of Chicago, Illinois, that the Affiant was acquainted with JULIUS A. RINKIS, 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 2240-42 West North Avenue in Chicago, Cook County, Illinois, 60647, and legally described as follows:

LOTS 14 AND 15 IN BLOCK 1 IN W. T. JOHNSON'S SUBDIVISION OF THAT PART OF LOT 5 AND THE SOUTH 33 FEET OF LOT 3 IN ASSESSORS DIVISION OF UNSUBDIVIDED LANDS IN THE SOUTH HALF OF THE SOUTH WEST QUARTER OF SECTION 31, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING BETWEEN OAKLEY AND LEAVITT STREETS, IN COOK COUNTY, ILLINOIS. *2*

P.I.N. 14-31-328-049-0000 and 14-31-328-050-0000

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 February 10, 1974, 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 \$ 10,000<sup>00</sup> and that the value of the above property individually was \$ 10,000<sup>00</sup>.

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 ATTORNEYS' TITLE GUARANTY FUND, INC. to issue its policy of title insurance on the above described property.

The Affiant hereby covenants and agrees, for herself, heirs, personal representative or assignees, 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 JULIUS A. RINKIS, 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.

ATGF, INC

Subscribed and sworn to before me this 6 day of May, 2001.

*Gerard D. Haderlein*  
Notary Public



*Birutta M. Walters* (SEAL)  
BIRUTA WALTERS



This Instrument was prepared by and please mail to: GERARD D. HADERLEIN, 3413 N. LINCOLN, CHICAGO, IL 60657

DISTRICT NO. 10.10  
REGISTERED NUMBER

MEDICAL CERTIFICATE OF DEATH

00000000

February 15 1974

DECEASED—NAME **Julius A. Rinkis** SEX **Male** DATE OF DEATH **February 10, 1974**

1. RACE **White** AGE—LAST BIRTHDAY (YRS.) **70** UNDER 1 YEAR: **None** DATE OF BIRTH (MONTH, DAY, YEAR) **6 January 27, 1904** PLACE OF DEATH **COOK COUNTY**

4. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER **Chicago** INSIDE CITY (YES/NO) **Yes** HOSPITAL OR OTHER INSTITUTION—NAME **St. Elizabeth Hospital** (IF NOT IN EITHER, GIVE STREET AND NUMBER)

7b. BIRTHPLACE (STATE OR FOREIGN COUNTRY) **Latvia** CITIZEN OF WHAT COUNTRY **Latvia** MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) **10. Married** NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF APPLICABLE) **Zuzanna Cektsters**

8. SOCIAL SECURITY NUMBER **109-26-7561** USUAL OCCUPATION **stockman** KIND OF BUSINESS OR INDUSTRY **warehouse** U.S. WAR VETERAN (YES/NO) **no** WAR OR DATES OF SERVICE **none**

12. RESIDENCE **11111 Illinois** 13a. **stockman** 13b. **warehouse** 13c. **none** 13d. **none** 13e. **none**

14. FATHER—NAME **Janis Rinkis** MOTHER—MAIDEN NAME **Anna Rinkis** (unavailable)

15. INFORMANT'S SIGNATURE **Anna Rinkis** RELATIONSHIP **daughter** MAILING ADDRESS (STREET AND NO. OR R. F. D. CITY OR TOWN, STATE, ZIP) **176 1045 N. Milwaukee, Chicago, Ill.**

16. DEATH WAS CAUSED BY: **Acute Myocardial Infarction** IMMEDIATE CAUSE **Arteriosclerotic Heart Disease** (a) **due to or as a consequence of** (b) **due to or as a consequence of** (c) **due to or as a consequence of**

PART II. OTHER SIGNIFICANT CONDITIONS, CONDITIONS CONTRIBUTING TO DEATH NOT RELATED TO CAUSE OF DEATH (PART I & II) **None**

DATE OF OPERATION, IF ANY: **None** MAJOR FINDINGS OF OPERATION **None**

19. ATTENDED THE DECEASED FROM **Jan 9, 1959** TO **Feb. 10, 1974** AND LAST SAW HIM/LIVE ALIVE ON **Jan. 21, 1974** HOUR OF DEATH **2:35P M.**

20. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THIS DEATH OCCURRED ON THE DATE, AT THE TIME AND PLACE, AND FROM THE CAUSE(S) STATED ON THE DATE. IF AN INJURY WAS INVOLVED IN THIS DEATH, THE CORONER MUST BE NOTIFIED.

SIGNATURE **Albert P. Kolbin** DATE SIGNED **February 10, 1974** ILLINOIS LICENSE NUMBER **226-36-31976**

22. MAILING ADDRESS—CERTIFIER **Dr. Albert V. Kainins, MD, 2444 N. Kedzie Ave., Chicago, Ill. 60647** STREET AND NUMBER OR R. F. D. CITY OR TOWN STATE ZIP

23. BUREAU OF CREMATION, REMOVAL (SPECIFY) **Funeral Home** CEMETERY OR CREMATORY—NAME **Christ Nielsen, Inc.** LOCATION **Chicago, Illinois** CITY OR TOWN STATE DATE (MONTH, DAY, YEAR) **Feb. 14, 1974**

24. FUNERAL HOME NAME **Christ Nielsen, Inc.** STREET AND NUMBER OR R. F. D. CITY OR TOWN STATE ZIP **Chicago, Illinois 60644**

25. FUNERAL DIRECTOR'S SIGNATURE **Henry C. Brown** CHICAGO BOARD OF HEALTH DATE RECD. BY LOCAL REGISTRAR (MONTH, DAY, YEAR) **FEB 13 1974**

25b. LOCAL REGISTRAR'S SIGNATURE **Henry C. Brown** CHICAGO CIVIC CENTER, ROOM 105 CONCOURSE LEVEL, CHICAGO 60602

26. ILLINOIS DEPARTMENT OF PUBLIC HEALTH—BUREAU OF VITAL RECORDS

STATE OF ILLINOIS }  
COUNTY OF COOK }  
CITY OF CHICAGO } SS

I, Murrey C. Brown, M.D., Local Registrar of Vital Statistics of the City of Chicago, do hereby certify that I am the keeper of the records of births, stillbirths and deaths of the City of Chicago and by virtue of the laws of the State of Illinois and the ordinances of the City of Chicago; that the accompanying certificate on this sheet is a true copy as a record kept by me in pursuance of said laws and ordinances.

This Certified Copy VALID Only When Original BLUE SEAL AND BLUE SIGNATURE Are Affixed.

Henry C. Brown

