



CHICAGO TITLE INSURANCE COMPANY

DECEASED JOINT TENANCY AFFIDAVIT

UNOFFICIAL COPY 00179022

1989/0184 03 001 Page 1 of 4
2000-03-13 14:46:49
Cook County Recorder 27.50



00179022

Property of Cook County Clerk's Office

State of Illinois)
County of Cook) ss.

Order No. _____

Mary F. Loucky being duly sworn
states that she resides at
2415 S Euclid
Berwyn in the City of

That she was acquainted with
Joseph Loucky
deceased who, at the time of his death, was one of the owners of the land
in Cook County, Illinois, described as

See Exhibit 'A' attached hereto and made a part hereof

That the deceased died September 1, 1999, as
evidenced by a certified copy of death certificate of the deceased attached hereto.

That the deceased died:

- Leaving no Last Will & Testament.
- Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven Will should be filed with the Clerk of the Probate Division of the Circuit Court of _____ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of _____ County, Illinois about _____.

That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of Two Hundred Thousand and 00/100 dollars.

Affiant makes this affidavit for that purpose of inducing the Chicago Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to before me by the said

UNOFFICIAL COPY

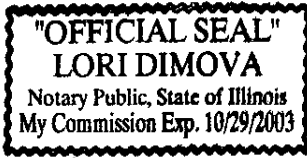
00179022

Mary F. Loucky

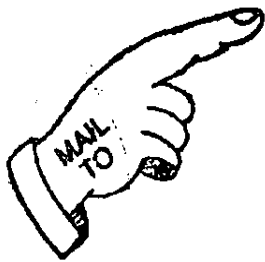
this 3rd day of ~~January~~ February, A.D. 2000

Lori Dimova
Notary Public

Mary F. Loucky
(affiant's signature)
Mary F. Loucky



Property of Cook County Clerk's Office



Jay Zabel + Associates, LTP
55 W. Monroe, Suite 3950
Chicago, IL 60603-5011

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EXHIBIT 'A'
Legal Description

00179022

001790

LOT 105 (EXCEPT THE SOUTH 10 FEET THEREOF) AND THE SOUTH 15 FEET OF LOT 106 IN OAK PARK AVENUE HOME ADDITION, A SUBDIVISION OF LOT 6 OF PARTITION OF THE WEST 51.49 ACRES OF THE WEST HALF OF THE NORTH EAST QUARTER AND THE EAST 41 ACRES OF THE EAST HALF OF THE NORTH WEST QUARTER OF SECTION 30, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office

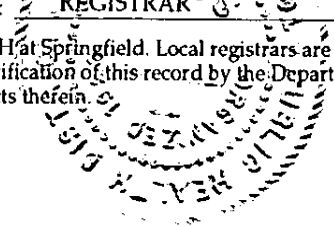
UNOFFICIAL COPY

I HEREBY CERTIFY THAT the foregoing is true and correct copy of the record for the person named and that this record was established and filed in my office in accordance with the provisions of the Illinois Statutes relating to the registration of births, stillbirths, and deaths.

DATE: SEP 02 1999
AT: BERWYN, ILLINOIS

SIGNED: Robert C. Pachou
OFFICIAL TITLE: REGISTRAR

The original record is permanently filed with the ILLINOIS DEPARTMENT OF PUBLIC HEALTH at Springfield. Local registrars are authorized to make certifications from copies of the original record. The Illinois statutes provide that the certification of this record by the Department of Public Health or the local registrar shall be prima facie evidence in all courts and places of the facts therein.



PRINTED BY AUTHORITY OF THE STATE OF ILLINOIS

DECEDENT'S BIRTH NO.
REGISTRATION DISTRICT NO. 16-21
REGISTERED NUMBER 665

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH
STATE FILE NUMBER

Type or Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS
DECEASED: 1. NAME: JOSEPH COOK, 2. SEX: MALE, 3. DATE OF DEATH: SEPT. 1, 1999

4. COUNTY OF DEATH: COOK, 5. AGE LAST BIRTH: 80 YRS, 6. UNDER 1 YEAR: 1 DAY, 7. UNDER 1 DAY: HOURS 1, MIN 54, DATE OF BIRTH: FEBRUARY 1, 1919

8. CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER: BERWYN, 9. HOSPITAL OR OTHER INSTITUTION: MACNEAL HOSPITAL, 10. SOCIAL SECURITY NUMBER: 355-07-2880, 11. NAME OF BUSINESS OR INDUSTRY: MAINTENANCE MACHINIST, 12. EDUCATION: RYANOLDS ALUMINUM

13. RESIDENCE (STREET AND NUMBER): 2415 S. EUCLID, 14. CITY, TOWN, TWP, OR ROAD DISTRICT NO.: BERWYN, 15. FATHER'S NAME: JOSEPH LOUCKY, 16. MOTHER'S NAME: MARY PACHEL

17. MARY F. LOUCKY, 18. PART I: Enter the diseases, or conditions that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest. Cause: Myelodysplastic Syndrome

19. CONDITIONS, IF ANY, WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST. (b) DUE TO, OR AS A CONSEQUENCE OF. (c) DATE OF OPERATION, IF ANY. Major findings of operation: Duodenal Ulcer, Angina

20. NAME AND ADDRESS OF CERTIFIER: Mark Hrovack MD, 6435 Cennack Rd, Berwyn IL. 21. DATE SIGNED: SEPT. 2, 1999

22. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER: Mark Hrovack MD, 6435 Cennack Rd, Berwyn IL. 23. ILLINOIS LICENSE NUMBER: 036-071240

24. BURIAL, CREMATION, REMOVAL, OR BURIAL: WOODLAWN CEMETERY OR CREMATORY - NAME: WOODLAWN, LOCATION: FOREST PARK IL, CITY OR TOWN: BERWYN IL, STATE: ILL.

25. FUNERAL HOME: H. MARIK-GEORGE SCHUBERT FUNERAL HOME, 6507 W. CERRAK RD., BERWYN IL. 60402. 26. LOCAL REGISTRAR'S SIGNATURE: Robert C. Pachou. 27. DATE FILED BY LOCAL REGISTRAR: SEP 02 1999.