JOINT TENANCY AFFIDAVIT

9826/0075 05 001 Page 1 of 3 2002-08-05 10:43:07

				2002		47.50
STATE OF	1661NO15			Cook Cou	nty Recorder	4),JU
'01VID 01 ") SS	•	(MI 2 114)		1
COUNTY O	F. COOK)	•		100 110 110	l
				.1	0020852863	ffiant resides at
	ATHEW STU	, hereb	y referred to as		, State of the d	1111115 :
	4/HEW STU	in the f	ity of		State of	sho time
/6/6_	W. ADDISON		1 5711	m PF	, the d	lecedent; at the time
that the affia	int was acquainted with '_	MARCALET owners of property, by virtue	<u>المورد ، ح</u>	recorded joint to	nancy deed, said	property located in
C don'th the	decedent was one of the o	owners of property, by virtu	ie of a property	recorded joint to	fallows:	•
or deam, me	County St	ate of	and leg, کو آم	ally described as	IOHOWS.	
	County, St	410 0. <u>7 2 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 </u>				
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	O _A		•			-th nor created any
	70_	husiness or partners	hip, nor held	any power of a	pointment at dea	IIII, not created uny
That the de	ecedent had no intere	any business or partners	a life interest	therein or the c	reation of interes	sts to take effect in
- ramainder	interests in property by	14, 3101				-
DOCCACCION	or enjoyment after deads,					~
	4	VLY 13, 1971.	leaving no a la	st will and testan	nent;	
That the de	cedent died on	ULN 13, 1911.	icaving normal			1
		ate, including the taxable in	toract in the ah	ove property was	S Zo,000	,, and
That the to	tal value of decedent's esta	ite, including the taxable in	iletest in the ac	O. C. Property		
	La a Calia' above nronetty II	OULL INTRALLY MAS V				
mat the var		Tax and the Federal Estate		- due from the d	ecedent's estate, h	ias been paid in full;
The short	and Fetate/Inheritance	Tax and the Federal Estate	Tax, it any wa	is due Hotti the d	cccaciii o valimi,	•
I nat the Si	ale and Estate, maintain	to induce Attorneys' Title		LT:- (ATG) to:	iccue its policy of	title insurance on the
	co leac this affidavit	to induce Attorneys' Title	Cuaranty Fund	i, Inc. (AIG) to	issue its pond, a-	
¥	cribed property.	1.	46		entina ar accio	mees to forever fully
		rees for himself/herself/th	iemselves, beir	, personal repre	sentatives of assis	attorney's fees and
The affian	t hereby covenants and ag	grees, for himself/herself/th d ATG harmless and to re which ATG may suffer, exp	imburse ATG	ior all loss, cos	its, damages, suit	s, attorney s recommend
indemnify	, protect, detend and now	which ATG may suffer, ext	end or incur b	y reason of the i	ssuance of said po	Siley free and creat es
expenses (of every kind and hattire v	d ATG harmless and to re which ATG may suffer, exp		しン		
the follow	ing objections:	• • •		-(0)	_	
		MARCALET. Toward Federal Estate Tax	1. 5701	MPF	the decedent;	
1. Cla	aims against the estate of	Tax and Federal Estate Tax	which may be	charged against	the estate of said	decedent;
			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		10	
3. Le	gacies, if any, created by t	he will of said decedent,			~ ~ ~	
: 4, Ri	ghts of contribution.			1	- (Jan.)-	├
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	day offu	(Month) (Y	ear)	OFFICIA	LCEAL	5
سُلًا سُلًا			{	OFFICIA		}
GF,			{	MICHAEL	C ROBERTS	}
–		ary Public)		NOTARY PUBLIC,	STATE OF ILLINOIS	}
-				MY COMMISSION	EXPIRES: 10/12/02	}
~		ill, it will be necessary that	the original O	certified copy th	ereof be presente	d to us for inspection.
Not	e: If the decedent left a w	ill, it will be necessary that	tile original or	ov should accom	nany this affidavi	it.
dea	th certificate, together with	ill, it will be necessary that a evidence of payment of d	eath taxes, it a	iry, silould accon	.hamil and	
			4			
12/	S, Int	Beverly Weiss		•		
m	a:/ +v: Le	gal & Title Services 4931 W. Estes				
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CTIONS CEASED RENTS USE-^\^ SICIAN'S CONDITIONS, IF ANY, WHICH GIVE RISE TO LIMEDIATE CAUSE (a) STATING THE UNDER-LYING CAUSE LAST. DECEASED FROM: MAILING ADDRESS PART II, OTHER SIGNIFICANT CONDITIONS 140. REGISTERED 23. JOHN B. SOCIAL SECURITY NUMBER CITY, TOWN, TWP. OR ROAD DISTRICT NUMBE BURIAL CREMATION, REMOVAL (SPECIFY) 24a. BUTTAL PART I RESIDENCE 12. 335-30-1321 BIRTHPLACE (STATE OR FOREIGN RACE WHITE, NEGRO, AMERICAN INDIAN, ETC. (SPECIFY) DECEASED-NAME SIGNATURE DATE OF OPERATION, IF ANY ZFORMAZ FUNERAL DIRECTOR'S SIGNATURE FUNERAL HOME FATHER-NAME 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 ILL INOIS ILL INOIS SIGNATURE Chicago come DEATH WAS CAUSED BY JACOBS <u> Hollerbac</u> CHU (MONTH, DAY, YEAR) 1961 IN DUE TO SELEG VEIN THROM 30S DUE TO OR AS A CONFEGUENCE OF IMMEDIATE CAUSE CEMETERY OR CREMATORY-NAME MARGARET 246. MAJOR FINDINGS OF OPERATION 130 HOUSEWIFE USUAL OCCUPATION CITIZEN OF WHAT COUNTRY 146 St AGE -- LAS: UNDER I YEAR UNDER I M.D. 2073 N. STREET U.S.A. LULIAMON HOSP REC 1411 COOK MEDICAL CERTIFICATE Joseph ,216. JULY 18. 4022-36 N. Elston CONDITIONS CONTRIBUTING STREET, AND NUMBER OR R. F. D. N. 3 Sb. THE CITY WIL ITELLO Yes (MO NTH, DAY, YEAR) [ENTER ONLY ONE CAUSE PER LINE FOR : 1), (... RELATIONSHIF TO DEATH BU WIDONAE NEVER MARRIED, WIDONAE DIYORGED (SPECIFY) 14c. CHICAGO 13b. OWN HOME CITY, TOWN, TWP. OR ROAD DISTRICT NO. KIND OF BUSINESS OR INDUSTRY 7d AUGUSTANA HOSPITAL HOSPITAL OR OTHER INSTITUTION-NAME INCOLN AVENUE CHICAGO ILLINOIS 60614 STUMPF 1971 jaic.HER 246 LOCATION NOT RELATED TO CAUSE GIVEN IN PART 1(8) MOTHER-MAIDEN NAME CITY OR TOWN DAY Kiver Grove 22b. JULY DATE SIGNED HER ALIVE ON: MAILING ADDRESS : (8 REET AND NO. OR R. F. D., CITY OR TOWN, STATE, 219) 6 FEB. 08. DATE OF BIRTH (MONTH, DAY, YEAR) PLACE OF DEATH Chicago CITY OR TOWN 9 2.FEMALE W DICKENS NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH, DEATH IULY 18, 19 (NSIDE CITY NAME OF SURVIVING SPOUSE (FAIDEN HAME, IF WIFE) U.S. WAR VETERAN WAR OR DATES OF SERVICE IN MATHEW STUND đ AND (c) (MO ITH, DAY, YEAR) JOKE PHINE FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER THE CORONER MUST, BE NOTHED. (MONTH, DAY, YEAR) 3 JULY 18 (IF NOT IN EITHER, GIVE STREET AND NUMBER) 1938 YES - 2021 N. DATE OF DEATH 1971 Llinois Illinois CH I CAGO 3 67 AND NUMBER (VES/NO) AUTOPSY 1971 9a. NO 13d STATE 220 ILLINOIS LICENSE NUMBER YES 24d DAIE . 21 d. 620678 HOUR OF DEATH F DEATH 30432 ILL 60614 1971 7 - 22 - 71APPROXIMATE INTERVAL MONTH, DAY, YEAR) UNKNOWN UNKNOWN TES, WERE FINDINGS CON TARANTINO (MONTH, DAY, YEAR) 11:45 PM KENMORE YES 60618 Cook COUNTY ٨٧

> CITY OF CHICAGO COUNTY OF COOK STATE OF ILLINOIS

JULY 21,

CALL LACTOR

"Kept by me in pursuanc accompanying certificat of Illinois and the ordin certify that I am the Registrar of Vital Stat laws and ordinances. the City of Chicago; and deaths of the City o the records of births, y virtue of the laws of the City of Chicago, a haet is a true copy as Murray C. Brown, M.

SEAL And BLUE SIG Only When Original Are Affixed. This Certified Copy



LOCAL REGIST

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CILLINOIS DEPARTMENT

Or own

OF PUBLIC HEALTH - BUREAU OF VITAL RECORDS

Chicago Civic Center, Room 105 Concourse Level, Chicago 60602

CHICAGO BOARD OF HEALTH DATE REC'D. BY LOCAL REGISTER MONTH, DAY, YEAR)

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	•	•					
	Karen Axelrod Gr	ad, Esq.	Avraham Zamir				
	(Nai		7140 Beckery, 4h				
1946 Lehigh, Uni+E (Address) Glenview, Illinois 60025 (City, State and Zip)			1616 W. Addison (Address)				
			Chicago, Illinois 60613 60053				
			Horton (City, State and Zip)				
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OR	RECORDER'S O	FFICE BOX NO.					
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