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JOINT TENANCY AFFIDAVIT



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1940/0132 20 001 Page 1 of 3
2002-09-25 11:21:47
Cook County Recorder 33.50

Mail To:

Ted Kowalczyk Esq.
6052 West 63rd Street
Chicago, IL 60638-4342



221171
MARQUIS TITLE
TM 59142/6390

4065

Above Space for Recorder's Use Only

Mary Kucharski, hereinafter referred to as the affiant, states under oath that the affiant resides at 5325 S. Talman, in the City of Chicago, Illinois; that the affiant was acquainted with PAUL KUCHARSKI, the decedent; that at the time of his death, the decedent was one of the owners of the property, by virtue of properly recorded joint tenancy warranty deed, said property located in, Cook County, Illinois, and legally described as follows:

SEE REVERSE FOR LEGAL DESCRIPTION

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 5, 1992, leaving no last will and testament;

That the total value of decedent's estate, including the taxable interest in the above property was \$ 65,000.00; and

That the value of the above property individually was \$ 75,000.00.

That the affiant makes this affidavit to induce **Marquis Title** to issue its policy of title insurance on the above described property.

The affiant hereby covenants and agrees, for himself/herself/themselves, heirs, personal representatives or assignees, to forever fully indemnify, protect, defend and hold **Marquis Title.**, harmless and to reimburse the Fund for all loss, costs, damages, suites, attorney's fees and expenses and every kind and nature which the fund may suffer, expend or incur by reason of the issuance of said policy free and clear of the following objections:

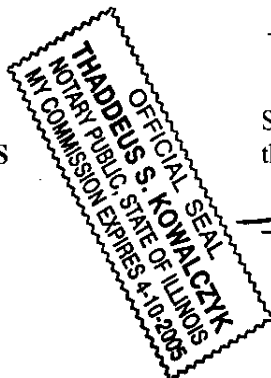
1. Claims against the estate of PAUL KUCHARSKI, the decedent;
2. Illinois State Inheritance Tax and Federal Tax which may be charges against the estate of said decedent;
3. Legacies, if any, created by the will of said decedent;
4. Rights to contribution.

Mary Kucharski (Seal)

STATE OF ILLINOIS)
) SS
COUNTY OF COOK)

Subscribed and Sworn to before me
this 17th day of September, 2002.

Thaddeus S. Kowalczyk
Notary Public



STEWART TITLE OF ILLINOIS
2 NORTH LASALLE STREET, SUITE 1920
CHICAGO, IL 60602

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LEGAL DESCRIPTION

LOT 26 IN BLOCK 3 IN HATAWAY AND ERSKINE'S SUBDIVISION IN THE EAST ½ OF THE SOUTHWEST ¼ OF THE SOUTHEAST ¼ AND THE EAST ½ OF THE NORTHWEST ¼ OF THE SOUTHWEST ¼ OF THE SOUTHEAST ¼ OF SECTION 12, TOWNSHIP 38 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Permanent Index Number (PIN): 19-12-419-007-0000

Address(es) of Real Estate: 5325 S. Talman, Chicago, IL 60632

21050182

Property of Cook County Clerk's Office

FEB 06 1992
 STATE OF ILLINOIS
 COUNTY OF COOK
 CITY OF CHICAGO

DECEASED-NAME: **PAWEL, RICHARD** FIRST MIDDLE LAST
 SEX: **2 MALE**
 DATE OF BIRTH: **15-1904** (MONTH, DAY, YEAR)
 DATE OF DEATH: **5-1992** (MONTH, DAY, YEAR)

COUNTY OF DEATH: **COOK**
 CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER: **CHICAGO**
 AGE-LAST BIRTHDAY (YRS): **87**
 HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER): **HOLY CROSS HOSPITAL**

BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY): **Poland**
 MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): **MARRIED**
 NAME OF SURVIVING SPOUSE (MOTHER NAME, IF WIFE): **Theresa Reich**

SOCIAL SECURITY NUMBER: **438-46-4190**
 USUAL OCCUPATION: **MACHINER, OPERATOR**
 KIND OF BUSINESS OR INDUSTRY: **SILVERGOLD CO.**
 EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED): **2**

RESIDENCE (STREET AND NUMBER): **5325 So. Talman Ave**
 CITY, TOWN, TWP. OR ROAD DISTRICT NO.: **Chicago**
 INSIDE CITY (YES/NO): **Yes**
 COUNTY: **COOK**

DECEASED'S NAME (TYPE OR PRINT): **FRANK KUCHARSKI**
 RELATIONSHIP: **WIFE**
 MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TWP., STATE AND ZIP): **170.5325 So. Talman Ave Chicago, IL 60632**

17a. **Theresa KucharSKI**
 17b. **Wife**
 17c. **170.5325 So. Talman Ave Chicago, IL 60632**

18. **Coronary Artery Disease**
 Enter the disease(s), or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line.

19a. **NO** 19b. **NO**
 19c. **NO**
 19d. **NO**

20. **1-3-92**
 DATE OF OPERATION, IF ANY: **20b.**
 MAJOR FINDINGS OF OPERATION: **20c.**

21. **15-11-1904**
 SIGNATURE OF CERTIFIER (TYPE OR PRINT): **21a.**
 NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT): **21b.**
R. KOZYCKY, M.D. 6222 S. PULASKI CHICAGO, IL. 60629

22. **15-11-1904**
 SIGNATURE OF DECEASED (TYPE OR PRINT): **22a.**
 NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT): **22b.**

23. **ILLINOIS LICENSE NUMBER 036-063850**
 NAME OF CEMETERY OR CREMATORY: **RESURRECTION**
 LOCATION: **JUSTICE**
 CITY OR TOWN: **CHICAGO**
 STATE: **ILL**
 DATE: **Feb 8-1992**

I, VIRGINIA L. PARKER, M.P.A., ACTING LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS FOR THE CITY OF CHICAGO 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 OF A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES.



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THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.