

UNOFFICIAL COPY



0317419011

Eugene "Gene" Moore Fee: \$30.50
Cook County Recorder of Deeds
Date: 08/23/2009 10:04 AM Pg: 1 of 4

DEED INTO TRUST

TYPE OF DOCUMENT

Property of Cook County Clerk's Office



MAIL TO:

ERNEST R. BLOMQUIST, III

750 West Northwest Hwy

Arlington Heights, IL 60004

NAME AND ADDRESS OF PREPARER:

Same



EUGENE "GENE" MOORE

RECORDER OF DEEDS / REGISTRAR OF TORRENS TITLES
COOK COUNTY, ILLINOIS

UNOFFICIAL COPY



Chicago Title Insurance Company

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF COOK

} ss.

Order No. _____

Helen P. Valko

being duly sworn

states that she resides at 134 Cathy Lane in the City of Mount Prospect, Illinois.

That she was acquainted with Steve P. Valko

deceased who, at the time of his death, was one of the owners of the land in Cook County, Illinois, described as:

See Attached

That the deceased died October 20, 2002, 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 _____ dollars.

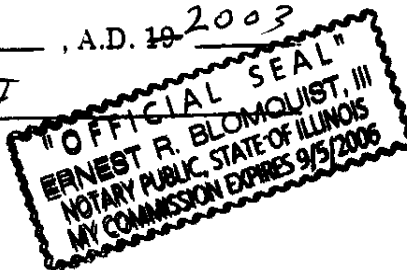
Affiant makes this affidavit for that purpose of inducing the Chicago Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to before me by the said

this 22 day of May, A.D. 192003

Ernest R. Blomquist III

Notary Public



Helen P. Valko

(affiant's signature)

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ORDER NUMBER: 1409 007482916 AH
STREET ADDRESS: 134 CATHY LANE
CITY: MT PROSPECT COUNTY: COOK
TAX NUMBER: 03-32-019-008-0000

LEGAL DESCRIPTION:

UNIT 7-8 IN THE COUNTRY HOMES AT MILLERS STATION CONDOMINIUM AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED REAL ESTATE: LOTS 10, 11 AND 12 IN MILLERS STATION SUBDIVISION, BEING A SUBDIVISION OF PART OF THE EAST 1/2 OF THE SOUTHEAST 1/4 OF SECTION 33, TOWNSHIP 42 NORTH, RANGE 11 EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED NOVEMBER 2, 1993 AS DOCUMENT 93087618 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, WHICH SURVEY IS ATTACHED AS EXHIBIT "A" TO THE DECLARATION OF CONDOMINIUM RECORDED DECEMBER 3, 1993 AS DOCUMENT 930989311, AS AMENDED FROM TIME TO TIME, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN COOK COUNTY, ILLINOIS

Property of Cook County Clerk's Office

At Cook County Department of Public Health, Official Title: Deputy Registrar
1010 Lake Street Suite 300 Oak Park, Illinois 60301

UNOFFICIAL COPY

OCT 24 2002

Signed *Madeleine Curry*

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent in item 1 and that this record was established and filed in my office in accordance with the provisions of Illinois statutes relating to the registrar of birth, stillbirth and death.

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER

REGISTRATION DISTRICT NO. **16.0**

REGISTERED NUMBER

DECEASED-NAME

FIRST

MIDDLE

LAST

SEX

DATE OF BIRTH (MONTH, DAY, YEAR)

1. COUNTY OF DEATH

2. CITY, TOWN, TWP. OR ROAD/DISTRICT NUMBER

3. AGE-LAST BIRTHDAY (YRS)

4. HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)

5a. 5b. 5c. 5d. 5e.

6a. 6b. 6c. 6d. 6e.

7. 7a. 7b. 7c. 7d. 7e.

8. 8a. 8b. 8c. 8d. 8e.

9. 9a. 9b. 9c. 9d. 9e.

10. 10a. 10b. 10c. 10d. 10e.

11. 11a. 11b. 11c. 11d. 11e.

12. 12a. 12b. 12c. 12d. 12e.

13. 13a. 13b. 13c. 13d. 13e.

14. 14a. 14b. 14c. 14d. 14e.

15. 15a. 15b. 15c. 15d. 15e.

16. 16a. 16b. 16c. 16d. 16e.

17. 17a. 17b. 17c. 17d. 17e.

18. 18a. 18b. 18c. 18d. 18e.

19. 19a. 19b. 19c. 19d. 19e.

20. 20a. 20b. 20c. 20d. 20e.

21. 21a. 21b. 21c. 21d. 21e.

22. 22a. 22b. 22c. 22d. 22e.

23. 23a. 23b. 23c. 23d. 23e.

24. 24a. 24b. 24c. 24d. 24e.

25. 25a. 25b. 25c. 25d. 25e.

26. 26a. 26b. 26c. 26d. 26e.

27. 27a. 27b. 27c. 27d. 27e.

28. 28a. 28b. 28c. 28d. 28e.

29. 29a. 29b. 29c. 29d. 29e.

30. 30a. 30b. 30c. 30d. 30e.

31. 31a. 31b. 31c. 31d. 31e.

32. 32a. 32b. 32c. 32d. 32e.

33. 33a. 33b. 33c. 33d. 33e.

34. 34a. 34b. 34c. 34d. 34e.

35. 35a. 35b. 35c. 35d. 35e.

36. 36a. 36b. 36c. 36d. 36e.

37. 37a. 37b. 37c. 37d. 37e.

38. 38a. 38b. 38c. 38d. 38e.

39. 39a. 39b. 39c. 39d. 39e.

40. 40a. 40b. 40c. 40d. 40e.

1. COUNTY OF DEATH: Cook
 2. CITY, TOWN, TWP. OR ROAD/DISTRICT NUMBER: 134 N. Cathy Lane
 3. AGE-LAST BIRTHDAY (YRS): 83
 4. HOSPITAL OR OTHER INSTITUTION-NAME: Northwest Community Hospital
 5a. 5b. 5c. 5d. 5e.
 6a. 6b. 6c. 6d. 6e.
 7. 7a. 7b. 7c. 7d. 7e.
 8. 8a. 8b. 8c. 8d. 8e.
 9. 9a. 9b. 9c. 9d. 9e.
 10. 10a. 10b. 10c. 10d. 10e.
 11. 11a. 11b. 11c. 11d. 11e.
 12. 12a. 12b. 12c. 12d. 12e.
 13. 13a. 13b. 13c. 13d. 13e.
 14. 14a. 14b. 14c. 14d. 14e.
 15. 15a. 15b. 15c. 15d. 15e.
 16. 16a. 16b. 16c. 16d. 16e.
 17. 17a. 17b. 17c. 17d. 17e.
 18. 18a. 18b. 18c. 18d. 18e.
 19. 19a. 19b. 19c. 19d. 19e.
 20. 20a. 20b. 20c. 20d. 20e.
 21. 21a. 21b. 21c. 21d. 21e.
 22. 22a. 22b. 22c. 22d. 22e.
 23. 23a. 23b. 23c. 23d. 23e.
 24. 24a. 24b. 24c. 24d. 24e.
 25. 25a. 25b. 25c. 25d. 25e.
 26. 26a. 26b. 26c. 26d. 26e.
 27. 27a. 27b. 27c. 27d. 27e.
 28. 28a. 28b. 28c. 28d. 28e.
 29. 29a. 29b. 29c. 29d. 29e.
 30. 30a. 30b. 30c. 30d. 30e.
 31. 31a. 31b. 31c. 31d. 31e.
 32. 32a. 32b. 32c. 32d. 32e.
 33. 33a. 33b. 33c. 33d. 33e.
 34. 34a. 34b. 34c. 34d. 34e.
 35. 35a. 35b. 35c. 35d. 35e.
 36. 36a. 36b. 36c. 36d. 36e.
 37. 37a. 37b. 37c. 37d. 37e.
 38. 38a. 38b. 38c. 38d. 38e.
 39. 39a. 39b. 39c. 39d. 39e.
 40. 40a. 40b. 40c. 40d. 40e.

REGISTRAR

Illinois Department of Public Health - Division of Vital Records

BASED ON 1989 U.S. STANDARD CERTIFICATE