


UNOFFICIAL COPY

DECEASED JOINT TENANCY AFFIDAVIT



0406540234
 Doc#: 0406540234
 Eugene "Gene" Moore Fee: \$50.00
 Cook County Recorder of Deeds
 Date: 03/05/2004 12:54 PM Pg: 1 of 3

State of Illinois)
) SS.
 County of Cook)

Daniel Joseph hereinafter called Affiant(s) being duly sworn states that he/she/they resides at: 6027 W 103rd Chgo Ridge That Affiant(s) was acquainted with Mina Juozgaitis, hereinafter referred to as Deceased, and at the time of Decedent's death, was one of the owners of the land in Cook County, Illinois, described as:

3P 4

365935

That the Deceased died on 11/21/03, as evidenced by a copy of Deceased's death certificate attached hereto.

That the Deceased, at the time of his/her death, held his/her share of the above-mentioned property as a joint tenant and that the Deceased died leaving no last will & testament.

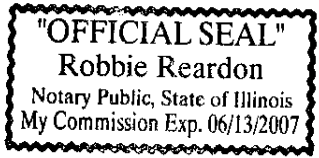
That the total value of the estate of the Deceased, for estate tax purposes, including both real and personal property owned by the Deceased either individually or in joint tenancy at the time of the death of the Deceased, does not exceed the sum of \$ 5,000.00.

Affiant makes this affidavit for the purpose of any individual or corporation who may be harmed by the Affiant's lack of veracity.

Subscribed and sworn before me
 this 17 day of Feb 20 04.

Robbie Reardon
 Notary Public

[Signature]
 Affiant's Signature



24-17-106-079-1002

STATE OF ILLINOIS
County of Cook

DAVID ORR, County Clerk

UNOFFICIAL COPY NOV 25 2003

I, David Orr, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.

IN WITNESS THEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the city of Chicago, in said County.

David Orr
COUNTY CLERK

DECEDENT'S BIRTH NO.

REGISTRATION NO. **16.0**

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

REGISTERED NUMBER	DECEASED-NAME	FIRST	MIDDLE	LAST	SEX	DATE OF BIRTH (MONTH, DAY, YEAR)	DATE OF DEATH (MONTH, DAY, YEAR)
	1. Nina Marie Juozapavich				2. Female	3. November 21, 2003	
	COUNTY OF DEATH	AGE LAST BIRTHDAY (YRS)	UNDER 1 YEAR MOS. DAYS	UNDER 1 DAY HOURS MIN.	DATE OF BIRTH (MONTH, DAY, YEAR)		
	4. Cook	5a. 69	5b.	5c.	5d. August 4, 1934		
	CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER	6a. Lutheran General Hospital			6b. Inpatient		
	6a. Park Ridge	NAME OF SURVIVING SPOUSE (M/DEN/NAME, IF WIFE)			7. Widowed		
	BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)	8a. Widowed			8b.		
	7. Chicago	KIND OF BUSINESS OR INDUSTRY			EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)		
	SOCIAL SECURITY NUMBER	10. 318-28-6753			11. At Home		
	RESIDENCE (STREET AND NUMBER)	11a. Homemaker			12. 12		
	10. 318-28-6753	CITY, TOWN, TWP. OR ROAD DISTRICT NO.			13. INSIDE CITY		
	13a. 6027 W. 103rd Street	13b. Chicago Ridge			13d. Cook		
	STATE	FACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY)			14b. X <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
	13e. Illinois	14a. White			14b. X <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
	FATHER-NAME FIRST MIDDLE LAST	16. Nina P. Brunner			17c. 3540 N. Lake Shore Dr #118		
	15. George J. Palke	RELATIONSHIP			MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP)		
	PARENTS	17a. Daniel Joseph			17b. Son		
	18. PART I.	17c. 3540 N. Lake Shore Dr #118			17d. Chicago, IL 60657		
	1. Immediate Cause (Final disease or condition resulting in death)	(a) Sepsis			(b) Pulmonary embolism		
	2. Conditions, if any, which give rise to immediate cause (a) stating the underlying cause last.	(a) DUETO OR AS A CONSEQUENCE OF			(b) DUETO OR AS A CONSEQUENCE OF		
	3. PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.						
	4. DATE OF OPERATION, IF ANY	MAJOR FINDINGS OF OPERATION			AUTOPSY (YES/NO)		
	5. I/D/D (DID NOT ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON)	20a. 11/21/2003			20b. NO		
	6. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.	21a. NO			21b. NO		
	7. SIGNATURE	22a. Dr. Nicholas S. Rabanos			22b. 8901 Golf Road Des Plaines, IL 60016		
	CERTIFIER	NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT)			NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)		
	8. BIRTHAL, CREMATION, REMOVAL (SPECIFY)	23a. Burial			23b. Casimir		
	9. FUNERAL HOME	23c. Chicago, Illinois			23d. Chicago, Illinois		
	10. FUNERAL DIRECTOR'S SIGNATURE	23e. Vân Henkelum Funeral Home			23f. 12534 S. Harlem Palos Heights, IL 60463		
	11. LOCAL REGISTAR'S SIGNATURE	23g. David Orr			23h. NOV 25 2003		
	12. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)	23i. NOV 25 2003			23j. NOV 25 2003		

Division of Vital Records

STANDARD CERTIFICATE

UNOFFICIAL COPY

STEWART TITLE

GUARANTY COMPANY
HEREIN CALLED THE COMPANY

ALTA COMMITMENT
Schedule A - Legal Description
File Number: TM136226
File No: "

COMMITMENT - LEGAL DESCRIPTION

Unit 2 together with its undivided percentage interest in the common elements in McVicker's Condominium, as delineated and defined in the Declaration recorded as document number 25008726, in the Northwest 1/4 of Section 17, Township 37 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois.

Property of Cook County Clerk's Office

**STEWART TITLE GUARANTY
COMPANY**