

UNOFFICIAL COPY

STATE OF ILLINOIS)
) ss
COUNTY OF COOK)



Doc#: 0411450064
Eugene "Gene" Moore Fee: \$26.00
Cook County Recorder of Deeds
Date: 04/23/2004 11:00 AM Pg: 1 of 2

**DECEASED JOINT TENANCY
AFFIDAVIT**

I, Janet H. Hetherington, being duly sworn state that I reside in Glenview, County of Cook, State of Illinois.

That I was married to William W. Hetherington at the time of his death. He was one of the owners of property located in Cook County, Illinois commonly known as 102 Rutgers Court, Glenview, Illinois 60025 and legally described as:

UNIT 15-10-R-H-102 IN PRINCETON VILLAGE CONDOMINIUM AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED REAL ESTATE: THAT PART OF LOT 1 IN PRINCETON VILLAGE, BEING A SUBDIVISION OF PART OF THE SOUTH EAST 1/4 OF THE NORTHEAST 1/4 OF SECTION 21, TOWNSHIP 42 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN WHICH SURVEY IS ATTACHED AS EXHIBIT "A" TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT NUMBER 89300376 AND AS AMENDED FROM TIME TO TIME TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN COOK COUNTY, ILLINOIS.

Street Address: 102 Rutgers Court, Glenview, Illinois 60025
Real estate index number: 04-21-203-016-1105

That deceased died December 8, 2003, as evidenced by a certified copy of death certificate of the deceased attached hereto. That the value of all assets passing to the Affiant are free from any federal or state estate taxes.

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

Janet H. Hetherington
Affiant

Subscribed and Sworn to
before me this 19th day
April 2004.
Eric G. Matlin
Notary Public



This document was prepared by (and upon Recordation, mail to):
Eric G. Matlin, P.C., Attorney at Law
500 Skokie Boulevard, Suite 350
Northbrook, Illinois 60062 (847) 849-4800

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STATE OF ILLINOIS
County of Cook

DAVID ORR, County Clerk

DEC 09 2003

UNOFFICIAL COPY

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 DISTRICT NO. 16.0	STATE OF ILLINOIS		STATE FILE NUMBER	
		REGISTERED NUMBER	MEDICAL CERTIFICATE OF DEATH			
Type or Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS	DECEASED - NAME FIRST MIDDLE LAST			SEX	DATE OF DEATH (MONTH, DAY, YEAR)	
	1. WILLIAM W. HETHERINGTON			2. Male	3. December 8, 2003	
	COUNTY OF DEATH		AGE - LAST BIRTHDAY (YRS)	UNDER 1 YEAR	UNDER 1 DAY	DATE OF BIRTH (MONTH, DAY, YEAR)
	4. Cook		5a. 80	5b. 5	5c. 11	5d. January 18, 1923
	CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER		HOSPITAL OR OTHER INSTITUTION - NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)		IF HOSP. OR INST. INDICATE D.O.A. OP/EMER. RM. INPATIENT (SPECIFY)	
	6a. Glenview		6b. 102 Rutgers Court		6c. - - -	
	BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)	NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)		WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO)
	7. Elyria, OH		8a. Married	8b. Janet Harper		9. Yes
	SOCIAL SECURITY NUMBER		USUAL OCCUPATION	KIND OF BUSINESS OR INDUSTRY	EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)	
	10. 282-12-0365		11a. Sales	11b. Advertising	12. 4	
RESIDENCE (STREET AND NUMBER)			CITY, TOWN, TWP, OR ROAD DISTRICT NO.	INSIDE CITY (YES/NO)	COUNTY	
13a. 102 Rutgers Court			13b. Glenview	13c. Yes	13d. Cook	
STATE		ZIP CODE	RACE (WHITE, BLACK, AMERICAN INDIAN, etc.)	OF HISPANIC ORIGIN? (SPECIFY NO OR YES - IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.)		
13e. Illinois		13f. 60025	14a. White	14b. <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES SPECIFY:		
FATHER - NAME FIRST MIDDLE LAST			MOTHER - NAME FIRST MIDDLE (MAIDEN) LAST			
15. Sydney W. Hetherington			16. Mae Levering			
INFORMANT'S NAME (TYPE OR PRINT)		RELATIONSHIP	MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP)			
17a. Mrs. Janet Hetherington		17b. Wife	17c. 102 Rutgers Ct., Glenview, IL 60025			
18. PART I. Enter the diseases, 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.					APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
Immediate Cause (Final disease or condition resulting in death)					10 YRS	
(a) EMPHYSEMA						
DUE TO, OR AS A CONSEQUENCE OF						
CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.						
(b) STROKE						
DUE TO, OR AS A CONSEQUENCE OF						
(c)						
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.						
DATE OF OPERATION, IF ANY		MAJOR FINDINGS OF OPERATION		AUTOPSY (YES/NO)	IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS?	
20a. 11-28-03		20b. STROKE		20c. No	19b. NO	
(DID) (DID NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON (MONTH, DAY, YEAR)			WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO)	HOUR OF DEATH		
21a. (11-28-03)			21b. Yes	21c. 11:15A M.		
TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.					DATE SIGNED (MONTH, DAY, YEAR)	
22a. SIGNATURE Stephen Bundra					22b. 12-8-03	
NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT)					ILLINOIS LICENSE NUMBER	
22c. Dr. Stephen Bundra, 1921 Lake Ave., Wilmette, IL 60091					22d. 036-069601	
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)					NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.	
23.						
BURIAL, CREMATION, REMOVAL (SPECIFY)	CEMETERY OR CREMATORY - NAME		LOCATION CITY OR TOWN STATE	DATE (MONTH, DAY, YEAR)		
24a. Med. Ed.	24b. Anatomical Gift Assn.		24c. Chicago, IL	24d. Dec. 9, 2003		
FUNERAL HOME NAME STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE ZIP						
25a. N.H. Scott & Hebblethwaite, 1240 Waukegan Road, Glenview, IL 60025						
FUNERAL DIRECTOR'S SIGNATURE				FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER		
25b. Stephen Bundra				25c. 034-015076		
LOCAL REGISTRAR'S SIGNATURE				DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)		
26a. David Orr				26b. DEC 09 2003		