UNOFFICIAL COPY

DECEASED JOINT TENANCY AFF



STATE OF ILLINOIS)
) SS
COUNTY OF COOK)

Doc#; 0423332075 Eugene "Gene" Moore Fee: \$46.50 Cook County Recorder of Deeds Date: 08/20/2004 02:48 PM Pg: 1 of 2

Djelka Stoll, hereinafter referred to as Affiant, being duly sworn states that she resides at: 6105 N. Lowell Avenue, Chicago, Illinois 60646. That Affiant was married to Ernest K. Stoll, 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:

THAT PAKT OF LOT 20 IN BLOCK 11 IN KRENN AND DATO'S CRAWFORD PETERSON ADDITION TO NORTH EDGLW'ATER, BEING A SUBDIVISION OF THE NORTH EAST FRACTIONAL 1/4 (EXCEPT THE NORTH 42 ROLS ("JEREOF") AND FRACTIONAL SOUTH EAST 1/4 OF SECTION 3, TOWNSHIP 40 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING NORTH OF THE INDIAN BOUNDARY LINE, (EXCEPT FROM ABOVE DESCRIBED TRACT OF LAND THAT PART THEREOF THAT LIES SOUTH OF A LINE THAT IS 100 FEET NORTH OF AND PARALLEL TO THE SOUTH LINE OF PETERSON AVENUE EXTENDED WEST) EXCEPT AI SO THE RIGHT OF WAY OF CHICAGO AND NORTHWESTERN RAILROAD COMPANY LYING NORTHWEST FXLY OF THE FOLLOWING DESCRIBED LINE:

BEGINNING AT THE INTERSECTION OF THE NORTHEASTERLY LINE OF NORTH LOWELL AVENUE AND THE NORTHEASTERLY LINE OF NORTHS AUGANASH AVENUE: THENCE NORTHEASTERLY A DISTANCE OF 119.0 FEET ON A LINE WHICH IF EXTINDED WOULD INTERSECT THE MOST NORTHERLY CORNER OF SAID LOT 20: THENCE NORTHEASTERLY TO A POINT ON THE NORTHEASTERLY LINE OF SAID LOT 20: SAID POINT BEING 5.0 FEET SOUTHEASTERLY DF THE MOST NORTHERLY CORNER OF SAID LOT 20 AS MEASURED ON SAID NORTHEASTERLY LINE OF LOT 20 ALL IN COOK COUNTY, ILLINOIS.

PERMANENT REAL ESTATE INDEX NUMBER: 13-03-218-040-0000 ADDRESS OF REAL ESTATE: 6105 N. Lowell, Clacago, Illinois 60646

That the Deceased died on January 26, 2000, as evidenced by a copy of Deceased's death certificate attached hereto;

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 ten may at the time of the death of the Deceased, does not exceed the sum of \$_150_000?

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

Djelka Stoll, Affiant

Subscribed and sworn before me

M day of A

2004

OFFICIAL SEAL
LAURA A HARRINGTON
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES: 12/19/07

Notary Public

OCAL PEGISTRAR you kan LAW AND ORDINANCES. KEPT BY ME IN ORDINANCE OF SAID SHEET IS A TRUE COPY OF A RECORD **ACCOMPANYING CERTIFICATE ON THIS** OF ILLINOIS AND THE ORDINANCES OF BY VIRTUE OF THE LAWS OF THE STATE AND DEATHS FOR THE CITY OF CHICAGO CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILLBIRTHS THE CITY OF CHICAGO, DO HEREBY THE CITY OF CHICAGO; THAT THE REGISTRAR OF VITAL STATISTICS OF SHEILA LYNE, RSM, LOCAL

JAN 28 2000

CITY OF CHICAGO STATE OF ILLINOIS COUNTY OF COOK

p.2

REGISTRATION 6 10	STATE OF ILLINOIS	STATE FILE NUMBER
REGISTERED NUMBER	MEDICAL CERTIFICATE OF	F DEATH 60/587
DECEASED-NAME F	FIRST MIDDLE LAST SEX	DATE OF DEATH (MONTH DA
i. Ernes	t Karl Stoll 2	JAn
_ ₹	E-LAST UNDER I YEAR	A HOTHER LINGST DAY YES
CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER	T NUMBER HOSPITAL OR OTHER INSTITUTION NAME (IF NOT IN EITHER	LER GIVESTHAFT AND RAMBER OF STREET FAM TRANSPORT (SPECIFY)
6a. Chicago	enant Hosp) 6c D C
REIGNCOL	ARRIED. NAME OF SURVIVING SPOUSE	NAME IF WIFE! WAS D
7. Yugoslavia		vicio
SIA.	ALOCCUPATION KIND OF BUSINESSC	·
RESIDENCE (STREET AND NUMBER)	CITY, TOWN, TWP, OR HOAD DISTRICT NO	
5 North	1 13b Chic	13c Y s 13d Cook
E	RACE (WHITE, BLACK, AMERICAN	(SPECIFY NOOR YES-IFY S SPECIFY CUBAN
131	White 14b MXNO	ES SPECIFY
HEN-WAWE FIRST	Control of the Contro	0
INFORMANT SNAME (TYPE OR PRINT)	MAILING ADD	HESS ISTREET AND NO OFFICE OFFICE OWN STATE THE 60305
lexandra	Koch 175. daughter 17c. 807	Keystone Kiver in
Enter the Shock, or	Enter the diseases, or complications that coused the death, both of enter the mode of dying. shock, or heart leave. List only one cause on each line.	3. Such as Calitinas virius principal parasis.
disease or condition (a)		
CONDITIONS, IF ANY	E TO, ORAS A CONSEQUENCE OF	
IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST	DUE TO, DRASA CONSEQUENCE OF	0,
PARTII. Other significant conditions control	Other eignificent corrections considering to doubbuind recreasiting in the underlying course given in PART I	O'SY Yer
DA EOFOPERATION, IF ANY	MAJORFINDINGS OF OPENATION	19a. NO 119b
20a.		L TO
AND LAST SAWHIM: HERD THE DECEASED AND LAST SAWHIM: HER ALIVE ON NOV	ember 18, 1999	EXAMINER NOTIFIED? VESTA 216 1:40 P.m. M.
222 SIGNATURE >) 1.0	EDGE DEATHOCCURREDAT THE TIME DATE AND PLASE AND DUTE TO THE CAUSE	N
m	R PRINT)	NSE Z
22c. Michele F. Carlon 7411 W.	ION 7411 W. Lale St. River Forest,	111 nois 22d 036-082359
23.		F 6
	CEMETERY OR CHEMATORY - MAME LOCATION - CITY OR TOWN	STATE DATE
24a Entombment 24b.	Rosehill Mausoleum 124c Chicago	UT CHITCHIS 1240 Jan 29, 2000
25a Memorial Funer:	al Home 3905 North Lincoln Chicago	O. 111inois 60613
口と	Me Kee David McKee	034-014367
LOCAL REGISTRAR'S SIGNATURE	the RSM	DATE FILEDBYC CALIFCOSTINAN MANDADAY YEARS

MULTICOLOR SIGNATURE SEAL IS AFFIXED. THIS CERTIFICATE COPY VALID WHEN

> DEPARTMENT OF PUBLIC HEALTH CITY OF CHICAGO