## **UNOFFICIAL COPY**



STATE OF ILLINOIS COUNTY OF COOK

MY COMMISSION EXPIRES: 07-28-05

Doc#: 0429327016 Eugene "Gene" Moore Fee: \$26.50 Cook County Recorder of Deeds Date: 10/19/2004 09:52 AM Pg: 1 of 2

## JOINT TENANCY AFFIDAVIT

MARIA SEPOT, hereinafter referred to as the affiant, states under oath that the affiant
resides at 107 Heart - Lane, in the City of Streamwood, Illinois: that the affiant was
acquainted with MICHAEL J. SEPOT, the decedent; that at the time of death,
the decedent was one of the owners of the property, by virtue of a properly recorded joint tenancy
warranty deed, said property, located in Winnebago County, Illinois and legally described as follows:
<b>Y</b>
LOT 27 IN ARLINGDALE LAKE, F.EING A SUBDIVISION OF THE SOUTHWEST QUARTER OF
THE SOUTHWEST QUARTER OF SECTION 13, TOWNSHIP 41 NORTH, RANGE 9, EAST OF THE
THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED
DECEMBER 31, 1979 AS DOCUMENT NUMBER 25300073, IN COOK COUNTY, ILLINOIS
P.I.N. 06-13-315-027
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:
interest therein of the creation of interests to take effect in 5 38 session of enjoyment after death;
That the decedent died on March 18, 1995, leaving no last will and testament;
That the decedent died on
That the total value of decedent's estate, including the taxable ir re est in the above property was
\$100,000.00 , and;
<b>T</b> /
That the value of the above property individually was \$60,000.00.
That the Illinois Inheritance Tax and the Federal Estate Tax, if any was due trong the decedent's
estate, has been paid in full.
mana lant
Mana Sepot  MARIA SEPOT
MARIA SEPOT
Subscribed and sworn to before me this 8th day of September , 2004.
Subscribed and sworn to before the this <u>oth</u> day of <u>september</u> , 2004.
Notary Public OFFICIAL SEAL
Notary Public OFFICIAL SEAL
STEVEN J FORTE {
NOTARY PUBLIC - STATE OF ILLINOIS

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or the decedent in item 1 and that this record was established and filed in my office in accordance with the provisions of Illinois statues relating to the registrar of birth, stillbirth and death.

Date MAR 1 7 1995

At Cook County Department of Public Health Official Title Deputy Registrar

1010 Lake Street Suite 300 Oak Park, Illinois 60301

Oun I aim, illinois 60301																													
ALCON (Heav (New)	WAREN L'SCOTT, 264. ▶ REGISTRAR	250 🕨	1	FUNERAL HOME	HEMOVAL (SPECIFY)	23		NAME AND ADDRESS OF CERT	TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED	AND LAST SAW FINTHEN ALIVE ON	20	3 1	STATING THE UNDERLYING CAUSE LAST. PART II. One statistical condenses.	WHICH GIVE RISE TO CAMBIEDIATE CAUSE (a)	decade or contien	PARTI.	Æ (TYPE	15 Josef	13e Illinois FATHER-NAME FIRST	STATE Healner	RESIDENCE (STREET AND NUMBER)	SOCAL SECURITY NUMBER	BATTHPLACE (CITYANDSTATEOR FOREINCOUNTRY)  7 POland	Moffman Estates	4 COOK COTY, TOWN, TWP, OR ROAD DISTRICT NUMBER	1 Michael		REGISTRATION DISTRICT NO.	
ithnois Department of Public Health—Division of			lshos Funeral Home Ltd. 185	248/14 YILLI CETTE LETY 2481 LES	NATORY-NAME	TANK CHIRA I IDAN CERTAFIER (TYPE OR PART)	N. Burnington -	CERTIFIER TYPE OR PRINT	DGE, DEATH OCCURRED ATTENIME, DATE AND PLACE AND DUE	(MONTH, DAY, )	20b	my hum	(C)	(b) DUE TO, THA SA CONSEQUENCE OF	DUE TO ORAS ACONSEQUENCE OF	Enter the diseases, or complications, "all -used the death, Do not enter shock, or heart failure. List only on cluse on each line.	(RELATIONSHIP	Sepot	180 107 14a White 14b	LIANE  I 1355 T. CARDING TO THE BLACK AMERICA OF HOUSE OF HOUSE OF THE BLACK AMERICA OF THE BLACK O	HERI CIPY, TOWN, TWP, O	USUAL OCCUPATION KIND OF BUS	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)  Ba. Married	02		2e	MEDICAL CERT	STATE OF ILLINOIS	
of Vital Records IBISEDON (983 U.S. STANDARD CERTIFICATE)	DATE FILE OBYLOCAL REGISTRAR MONTH DAY YEAR. 266, MAR 2. 0 1995	NSE NUMBE A		es, 1111nois March 21, 1995	CITY OR YOWN STATE DATE (MONTH, DAY	MOTE: IF AMBAUMY WAS INVOLVED IN THIS DEAN'THE COMMENT ON MEDICAL EXAMINER MUST BE NOTIFIED.	to France Estates 220 036-059419	arch	TOTHE CAUSE (S) STATED. DATE SIG	EVE	FEMALE WAS THERE A PREGMANCY IN PAST THREE MASS THERE A PREGMANCY IN PAST CASE OF THE PAST	19a, NO 196			Infection	the mode of dying, such as cardiac or respiratory ares	DDRESS (STREET AND NO ORRED. 2017	Muk	THEP-NAME FIRST MIDDLE (MAIDEN) LAST	13c Yes   13d COOK   13d COOK	A YOAD DISTRICT NO. INSIDE CITY COUNTY	EDUCATION ISPECIFY ONLY HIGHEST GRADE Elimentary Secondary (D-12) College (11-4)	NDENNAME IF WIFE	ledical Col. ter 6c. DOA	BIRTHOAY (788) MOS DAYS HOURS MIN SOLVENDER TO, 1922  HOSPITAL OROTHER INSTITUTION AMORE IR NOT INSTITUTE ON THE ET AND ALBERT OF THE CONTROL OR OTHER INSTITUTION AMORE IR NOT INSTITUTE ON THE PROPERTY OF THE CONTROL OR OTHER INSTITUTION AMORE IR NOT INSTITUTE ON THE PROPERTY OF THE CONTROL OR OTHER INSTITUTION AMORE IR NOT INSTITUTE ON THE PROPERTY OF THE CONTROL OR OTHER INSTITUTION AMORE IR NOT INSTITUTION AND THE PROPERTY OF THE PROPERTY	Male 3 March	OF DEATH	LINOIS STATE FILE	•