UNOFFICIAL COPY

ATG OR OTHER TITLE COMPANY

AFFIDAVIT OF DECEASED JOINT OH-0040/C/C/TENANT 292 Lawyers Unit #05692 Case#	Doc#: 00 m
STATE OF ILLINOIS) FILE Name: <u>OHOOY</u> 0/0/ COUNTY OF COOK)	Doc#: 0517346086 Eugene "Gene" Moore Fee: \$28.00 Cook County Recorder of Deeds Date: 06/22/2005 09:08 AM Pg: 1 of 3
being duly sworn and for the purpose of inducing Adercey's Title Guaranty to issue the subject policy covering the hereinafter-described land, state	
1. That I reside at 3/15 TOWN SQUE POULING MEADOWS, 3	
2. That I was acquainted with Thomas SeptemBer 17, 2004, as evidenced by a certificate;	the attached certified copy of death
3. That said decedent was one of the ov	vners of land described:
in the subject order number	r; D
in the following legal description	ription. SEE LEGAL ON REVERSE
4. That said decedent died:	TS
[] leaving no last will and test	tament;
	ament, a copy of which is attached.
5. That the total value of the estate of sa inheritance tax and Federal estate tax purposes of	lid decedent for State of Illinois loes not exceed \$ them taxees Dent
Subscribed and sworn to before me this & 9 day of	Unnie Sluga ANNIE SLOCA
Notary Public M	MAIL TO CAROLINE WAKERED
"OFFICIAL SEAL" Mary Lou Zurawski Notary Public, State of Illinois My Commission Exp. 06/06/2007	MIL TO CAROLINE WAKERED GO ANNIE SLUGA 2011 MARTIN LN ROUING MEADOWS, IL 60008

0517346086 Page: 2 of 3

UNOFFICIAL COP

EXHIBIT A

3115 Town Square, #208, Rolling MEadows, IL PIN #02-36-105-052-1112

PARCEL ONE: UNIT 4-208 TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN KIMBALL SQUARE CONDOMINIUM. AS DELINEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT NUMBER 98778544, AS AMENDED FROM TIME TO TIME, IN THE WEST HALF OF SECTION 36, TOWNSHIP 42 NORTH. RANGE 10, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY. ILLINOIS.

PARCEL TWO: EASEMENT FOR THE RIGHT TO USE PARKING STALL AND STORAGE UNIT 7 IN BUILDING 4 AS SET FORTH IN SAID DECLARATION RECORDED AS DOCUMENT NO. 98788544, AS AMENDED FROM TIME TO TIME.

PARCEL THREE: EASEMENTS FOR THE BENEFIT OF PARCEL ONE AS CREATED BY DECLARATION OF EASEMENTS RECORDED AS DOCUMENT NO. 97204406, FOR INGRESS AND EGRESS.

SUBJECT TO: CONDITIONS AND RESTRICTIONS OF RECORD, REAL ESTATE TAXWS FOR THE YEAR 2004 AND SUBSEQUENT YEARS.

prepared by Many Lew Zurawski.

Aprepared by Many Lew Zurawski.

Chicago, X1. 60631

0517346086 Page: 3 of 3

County of Cook

UNOFFICIAL COPY SEP 2 0 2004

I, David On Sounty Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files 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.

Hand On

NTS BIRTH	NO. REGISTRATION DISTRICT NO.	0	S				
	DISTRICT NO. REGISTERED NUMBER MEDICAL CERTIFICATE OF DEATH						STATE FILE NUMBER
or Print in IANENT INK eral Director	DECEASED-NAME s, 1. Thom	FIRST	MIDDLE	LAST	SEX	DATE OF DE	ATH (MONTH, DAY, YEAR)
or Physiciar dbook for RUCTIONS	4. Cook		AGE-LAST BIRTHDAY (YRS)	MOS. BAYS HOU	··• min.	OF BIRTH (MONTH	tember 17, 2004 DAY.YEAR)
	CITY, TOWN, TWP, OR ROAD 6a. Arlington V	ei thte	HOSPITAL OR OTHER	R INSTITUTION-NAME (IF NOT IN EITHER, GIVE	December () ESTREET AND NUMBER	1, 1920 R) IF HOSP, OR INST. INDICATE D.O.A. OP/EMER. RM. INPATIENT (SPECIFY
ECEASED	BIRTHPLACE (CITY AND STATE FOREIGN COUNTRY) DUC KILET 7.1111 DO1S	OR JARRIED NEV	ER MARRIED, ORCED (SPECIFY)	NAME OF SURVIVING	SPOUSE (MAIDE	N NAME, IF WIFE)	MAS DECEASED EVER IN U ARMED FORCES? (YES/NO)
	SOCIAL SECURITY NUMBER 10. 334-12-9667	USU/_ JCCUP	NOLTA	8b. <u>Carolir</u> KINO OF BUSINESS O	ne Laulet RINDUSTRY EDI	JCATION (SPECIFY O	9. Yes
	RESIDENCE (STREET AND NUM	*	<u>Maker</u>	11b. Soap Con WN, TWP, OR ROAD D	202011	INSIDE CITY	12) College (1-4 or 5+)
*******	40. 7334	IP CODE RA	IAN, etc.) (S) T. J. (olling Meac	ONS (SPECIFY N	(YES/NO) 13c. Yes IO OR YES-IF YES SPEC	13d. COOK DIFY CUBAN, MEXICAN, PUERTO RICAN, B
ARENTS	FATHER-NAME FIRST	31.60008 14a	White LAST	14b. (X	NO TYES	SPECIFY:	
	15. Thomas	PRINT)	akefield RELAT	16.	Ethel	EET AND NO OR C	(MAIDEN) LAST Dilworth COTY OR TOWN, STATE, ZIP)
	17a. Caroline Wa 18. PARTI. Enter the	akefield e diseases, or complication or heart failure. List only	17b. W		2112 I UWU	S (111 2 20 A)	
	Academic in Deach)	(a) C 141			or dying, such as (cardiac or respiratory	APPROXIMATE INTERVAL BETWEEN ONSET AND DEA
AUSE	CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING	DUE TO, OR AS A CON	*		0/2		
	CAUSE LAST.	DUE TO, OR AS A CON	•		GA	7,	
	DATE OF OPERATION, IF ANY	s contributing to death but not		use given in PART I.		in No.	RE AUTOPSY FINDINGS AVAILABLE PRIOR TO MPLETION OF CAUSE OF DEATH? (YES/NO)
	20a. '	MAJOR FINDINGS (20b.				THREE !	
	J (DID) (DID NOT) ATTEND THE C AND LAST SAW HIM/HER ALIVE (21a. TO THE BEST OF MY KNOW EDG	ルーションショ	AY, YEAR)		WAS CORONER OF EXAMINER NOTIFIE	MEDICAL HOUR	- 2 1
TIFIER	TO THE BEST OF MY KNOWLEDGE 22a. SIGNATURE NAME AND ADDRESS OF CERTIF	IER (TYPE OR PRIM	11/2	D PLACE AND DUE TO	THE CAUSE(S) ST	j	SIGNED (MONTH, DAY, YEAR)
	22c. DR. WILLIAM MOR NAME OF ATTENDING PHYSICIAN			rodal #100 Az	LINGIDN HIS	22b.	S LICENSE NUMBER
,	BURIAL CREMATION (DE	METERY OR CREMATOR)			236-106016 AN INJURY WAS INVOLVED IN THIS BE CORONER OR MEDICAL EXAMIN
SITION	24a Entomb 24b FUNERAL HOME	All Saints	Cemetery	24c. Des P.	TYORTOWN laines	STATE T I	DATE (MONTH, DAY, YEAR)
on on	25a. Meadows Funer FUNERAL DIRECTOR'S SIGNATUR	al Home 361	5 Kirchoff	Road Rollin	arrortown ng Meadows	, IL 6000:	Z4d. 09/22/2004 E ZIP 3
	LOCAL REDISTRAR'S SIGNATURE	//	taber o	the	FUNERU 25c.	O34 01038	S LICENSE NUMBER
	VR200 (REV. 5/84)	Minois Denado	nent of Public Health D		DATE FI	LOOBY LOCAL REGIST	RAR (MONTH, DAY, YEAR)
			Solve / Idalati D	vision of VIIal Records		(BASED ON 1	989 U.S. STANDARD CERTIFICATI