

UNOFFICIAL COPY

PREPARED BY AND
AFTER RECORDING RETURN TO:
O'Connor Title
162 W. Hubbard St.
Chicago, IL 60610

File: FA-06-361



Doc#: 0611034086 Fee: \$28.00
Eugene "Gene" Moore
Cook County Recorder of Deeds
Date: 04/20/2006 02:02 PM Pg: 1 of 3

DECEASED JOINT TENANT AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF _____

CARRIE M. RADON, being duly sworn states that SHE resides at
414 N. WILSHIRE LANE in the City of Arlington Heights, Illinois.

That the undersigned was acquainted with BENEDICT R. RADON, deceased, who at the time of his/her death, was one of the owners of the real estate described in the title insurance commitment reference above, commonly known as 414 North Wilshire Lane, Arlington Heights, IL 60004.

The deceased died on 2-16-04, as evidenced by a certified copy of death certificate of the deceased attached hereto.

That the deceased died:

☒ Leaving no Last Will and Testament

☐ Leaving a Last Will and Testament, a copy of which is attached hereto. The original of the unproven Will should be filed with the Clerk of the Probate Division of the Circuit Court of, Cook, Illinois.

☐ Leaving a Last Will and Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of Cook, Illinois.

That the total value of the estate of the deceased, including both real estate 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 \$750,000.00.

Affiant makes this affidavit for that purpose of inducing O'Connor Title Guaranty, Inc. and its underwriter(s) to issue its Title Insurance Policy, describing the above mentioned property.

[Signature]
Affiant's Signature



Sworn and subscribed this 13th day of APRIL, 2005

[Signature]
Notary Signature

STATE OF ILLINOIS
County of Cook

DAVID ORR, County Clerk

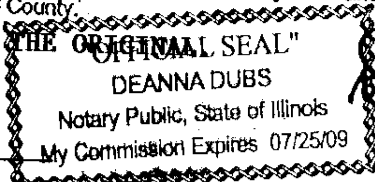
FEB 18 2004

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.

THIS IS A TRUE AND EXACT COPY OF THE ORIGINAL SEAL

Deanna Dubs
NOTARY PUBLIC 4-13-06



David Orr
COUNTY CLERK

☒ PERMANENT CERTIFICATE

REGISTRATION DISTRICT NO. 16.0

☐ TEMPORARY CERTIFICATE

REGISTERED NUMBER

269 FEB 04

STATE OF ILLINOIS

STATE FILE NUMBER

MEDICAL EXAMINER'S - CORONER'S
CERTIFICATE OF DEATH

Type, or Print in
PERMANENT INK
See Coroner's
or Funeral Directors
Handbook for
INSTRUCTIONS

DECEASED

A
B
C
D
E

PARENTS

CAUSE

N
P
H.G.
RIF
UNK

CERTIFIER

DISPOSITION

1. BENEDICT R. RADON		SEX	2. MALE	DATE OF DEATH (MONTH, DAY, YEAR)	3. FEBRUARY 16, 2004
COUNTY OF DEATH		AGE - LAST BIRTHDAY (YRS)	UNDER 1 YEAR	UNDER 1 DAY	DATE OF BIRTH (MONTH, DAY, YEAR)
4. COOK		5a. 42	5b. MOS. DAYS	5c. HOURS MIN.	5d. April 7, 1961
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. ARLINGTON HEIGHTS		6b. 14 S. BEVERLY			6c. SCENE
BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)		NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)	
7. Chicago, Illinois		8a. Married		8b. Carrie M. Richardson	
SOCIAL SECURITY NUMBER		KIND OF BUSINESS OR INDUSTRY		EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)	
10. 356-58-2461		11a. Investigator		11b. U.S. Post Office	
RESIDENCE (STREET AND NUMBER)		CITY, TOWN, TWP. OR ROAD DISTRICT NO.		INSIDE CITY (YES/NO)	
13a. 414 N. WILSHIRE		13b. ARLINGTON HEIGHTS		13c. YES	
STATE		ZIP CODE		CITY, TOWN, TWP. OR ROAD DISTRICT NO.	
13e. ILLINOIS		13f. 60004		13g. YES	
FATHER - NAME FIRST MIDDLE LAST		MOTHER - NAME FIRST MIDDLE LAST		(MAIDEN) LAST	
15. Richard Radon		16. Chesterine Szela			
INFORMANT'S NAME (TYPE OR PRINT)		RELATIONSHIP		MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP)	
17a. Carrie M. Radon		17b. Wife		17c. 414 N. Wilshire Arlington Hts. IL. 60004	
18. PART I		Enter the diseases, injuries, 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.			
Immediate Cause (Final disease or condition resulting in death)		(a) GUNSHOT WOUND OF HEAD			
CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.		(b) DUE TO, OR AS A CONSEQUENCE OF			
		(c) DUE TO, OR AS A CONSEQUENCE OF			
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.					
NATURAL, ACCIDENT, HOMICIDE, SUICIDE, UNDETERMINED (SPECIFY)		DATE OF INJURY (MONTH, DAY, YEAR)		HOW INJURY OCCURRED (ENTER NATURE OF INJURY MENTIONED IN PART I OR PART II, ITEM 3)	
20a. SUICIDE		20b. FEB 16, 2004		20c. 6:45 A.M.	
INJURY AT WORK (YES/NO)		PLACE OF INJURY (AT HOME, FARM, STREET, FACTORY, OFFICE BUILDING, ETC.) (SPECIFY)		LOCATION (CITY, VIL. OR TOWN; OR TWP.; OR RD. DIST. NO.; COUNTY, STATE)	
20e. NO		20f. AUTOMOBILE		20g. ARLINGTON HEIGHTS, COOK COUNTY, ILLINOIS	
I CERTIFY THAT IN MY OPINION BASED UPON MY INVESTIGATION AND/OR THE INQUIRY, THIS DEATH OCCURRED ON THE DATE, AT THE PLACE AND DUE TO THE CAUSE(S) STATED, AND THAT		THE DECEDENT WAS PRONOUNCED DEAD ON		AT	
21a. CORONER'S - MEDICAL EXAMINER'S SIGNATURE		21b. FEBRUARY 16, 2004		21c. 10:50 A.M.	
22a. CORONER'S PHYSICIAN'S NAME (Type or Print)		22b. FEBRUARY 17, 2004		22c. DATE SIGNED (MONTH, DAY, YEAR)	
23a. P. M. Donaghy, M.D.		23b. Ponni Arunkumar, M.D.		23c. DATE SIGNED (MONTH, DAY, YEAR)	
BURIAL, CREMATION, REMOVAL (SPECIFY)		CEMETERY OR CREMATORY - NAME		LOCATION CITY OR TOWN STATE	
24a. Burial		24b. Memory Gardens		24c. Arlington Hts., Illinois	
FUNERAL HOME		NAME STREET AND NUMBER OR R.F.D.		CITY OR TOWN STATE ZIP	
25a. Lauterburg & Oehler Funeral Home 2000 E. Northwest Hwy. Arlington Hts. IL 60004		25b. James R. Murray Jr.		25c. 034-011936	
LOCAL REGISTRAR'S SIGNATURE		DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)		26b. February 18, 2004	
26a. David Orr		26b. February 18, 2004			

UNOFFICIAL COPY

First American Title Insurance Company

COMMITMENT

Schedule A

File No: **FA-06-361**

EXHIBIT A

Lot 18 in Block 2 in Arlington Acres, being a Subdivision of part of the Northwest $\frac{1}{4}$ of the Southwest $\frac{1}{4}$ of Section 28, Township 42 North, Range 11, East of the Third Principal Meridian, according to the plat thereof registered on November 23, 1955, as Document LR1636246, in Cook County, Illinois.

FOR INFORMATIONAL PURPOSES.

Address: 414 North Wilshire Lane, Arlington Heights, IL

PIN: 03-28-307-025