

# UNOFFICIAL COPY

ATTORNEYS' TITLE GUARANTY FUND, INC.

## JOINT TENANCY AFFIDAVIT

STATE OF IL )  
 ) SS  
COUNTY OF COOK )

Virginia Feigel,  
hereby referred to as the affiant, states under  
17730 67th  
oath that the affiant resides at Court

In the City of Tinley Park,  
State of IL;  
that the affiant was acquainted with \_\_\_\_\_  
Edwin Feigel,  
the decedent; at the time of death, the  
decedent was one of the owners of property,  
by virtue of a properly recorded joint  
tenancy deed, said property located in  
COOK County, State of  
IL, and legally

described as follows:  
Lot 131 in O. Rueter and Company's Tinley Park Gardens, being a subdivision of the South 60 acres of the West half of the North East quarter of Section 31, Township 36 North, Range 13 East of the Third Principal Meridian in Cook County, Illinois.



Doc#: 0619504145 Fee: \$28.00  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 07/14/2006 02:18 PM Pg: 1 of 3

0619504145

(1 of 3)

Property: 17730 67th Ct. Tinley Park, IL 60477  
FIN: 28-31-208-011-0000

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;

The decedent died on April 12, 2004, leaving no/a last will and testament;

The total value of decedent's estate, including the taxable interest in the above property was \$ 200,000.00, and that the value of the above property individually was \$ 187,000.00.

The State and Estate/Inheritance Tax and the Federal Estate Tax, if any, that was due from the decedent's estate, has been paid in full;

The affiant makes this affidavit to induce Attorneys' Title Guaranty Fund, Inc. (ATG) to issue its policy of title insurance on the above described property.

Attorneys' Title Guaranty Fund, Inc.  
33 N. Dearborn, Suite 650  
Chicago, Illinois 60602-3104  
(312) 372-1735

3K9

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## JOINT TENANCY AFFIDAVIT (continued)

The affiant hereby covenants and agrees, individually, and for the affiants, heirs, personal representatives or assignees, to forever fully indemnify, protect, defend and hold ATG harmless and to reimburse ATG for all loss, costs, damages, suits, attorney's fees and expenses of every kind and nature that ATG may suffer, expend or incur by reason of the issuance of said policy free and clear of the following objections:

1. Claims against the estate of Edwin Feigel, the decedent;
2. State Estate/Inheritance Tax and Federal Estate Tax that may be charged against the estate of said decedent;
3. Legacies, if any, created by the will of said decedent;
4. Rights of contribution.

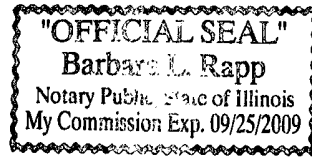
Virginia Feigel (Seal)

\_\_\_\_\_ (Seal)

Subscribed and sworn to before me this

29th day of June, 2006  
(Month) (Year)

Barbara L. Rapp  
(Notary Public)



**Note:** If the decedent left a will, it will be necessary that the original or certified copy thereof be presented to ATG for inspection. A death certificate, together with evidence of payment of death taxes, if any, should accompany this affidavit.

This instrument prepared by:  
Hutchison, Anders & Hickey  
 \_\_\_\_\_  
 (Name)  
16860 S. Oak Park Ave.  
 \_\_\_\_\_  
 (Address)  
Tinley Park, IL 60477  
 \_\_\_\_\_  
 (City, State, Zip)

Return to:  
Hutchison, Anders & Hickey  
 \_\_\_\_\_  
 (Name)  
16860 S. Oak Park Ave.  
 \_\_\_\_\_  
 (Address)  
Tinley Park, IL 60477  
 \_\_\_\_\_  
 (City, State, Zip)

STATE OF ILLINOIS  
County of Cook**UNOFFICIAL COPY**  
DAVID ORR, County Clerk

APR 14 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.

*David Orr*  
COUNTY CLERK

DECEDENT'S BIRTH NO.		REGISTRATION DISTRICT NO. <b>16.0</b>	STATE OF ILLINOIS		STATE FILE NUMBER	
		REGISTERED NUMBER	<b>MEDICAL CERTIFICATE OF DEATH</b>			
Type or Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS	1. DECEASED—NAME FIRST MIDDLE LAST <b>EDWIN FEIGEL</b>		SEX 2. <b>Male</b>	DATE OF DEATH (MONTH, DAY, YEAR) 3. <b>April 12, 2004</b>		
	4. COUNTY OF DEATH <b>COOK</b>		AGE—LAST BIRTHDAY (YRS) 5a. <b>79</b>	UNDER 1 YEAR 5b. MOS. DAYS	UNDER 1 DAY 5c. HOURS MIN.	DATE OF BIRTH (MONTH, DAY, YEAR) 5d. <b>April 10, 1925</b>
	6a. <b>Hazel Crest</b>		6b. <b>South Suburban Hospital</b>		6c. <b>Inpatient</b>	
	7. <b>Frankfort, IL.</b>		8. <b>Married</b>		8b. <b>Virginia Peacock</b>	
	10. <b>331-28-2323</b>		11a. <b>Truck Driver</b>		11b. <b>Trucking</b>	
13a. <b>17730 S. 67th Ct.</b>		13b. <b>Tinley Park</b>		13c. <b>Yes</b>		
13e. <b>Illinois</b>		13f. <b>60477</b>		13d. <b>Cook</b>		
14a. <b>White</b>		14b. <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES SPECIFY:		14c. <b>8</b>		
15. <b>John Feigel</b>		16. <b>Hulda Harms</b>		17c. <b>17730 S. 67th Ct. Tinley Park, IL.</b>		
17a. <b>Virginia Feigel</b>		17b. <b>Wife</b>		17d. <b>60477</b>		
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.		(a) <b>Stomach CA</b>		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH <b>3 mo</b>		
CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.		(b) 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.		(c) DUE TO, OR AS A CONSEQUENCE OF				
20a. DATE OF OPERATION, IF ANY		20b. MAJOR FINDINGS OF OPERATION		19b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (YES/NO) <b>NO</b>		
21a. 1 (DID) (DID NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON (MONTH, DAY, YEAR) <b>4/11/04</b>		21b. WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) <b>NO</b>		21c. HOUR OF DEATH <b>14:45 P. M.</b>		
22a. SIGNATURE <i>C. M.</i>		22b. DATE SIGNED (MONTH, DAY, YEAR) <b>4/13/04</b>		22c. ILLINOIS LICENSE NUMBER <b>036 090 846</b>		
22c. NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) <b>Cecilia Ibrahim-16750 S. 80th Ave-Tinley Park, IL</b>		22d. 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.		
24a. BURIAL CREMATION, REMOVAL (SPECIFY) <b>Burial</b>		24b. CEMETERY OR CREMATORY—NAME <b>Zion Lutheran</b>		24c. LOCATION CITY OR TOWN STATE <b>Tinley Park, Illinois</b>		
24d. FUNERAL HOME NAME <b>Brady-Gill F.H.,</b>		24e. STREET AND NUMBER OR R.F.D. <b>16600 S. Oak Park Ave.</b>		24f. CITY OR TOWN STATE ZIP <b>Tinley Park, Illinois 60477</b>		
25a. FUNERAL DIRECTOR'S SIGNATURE <i>Peggy A. Schaffer</i>		25b. FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER <b>034-014240</b>		25c. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) <b>APR 14 2004</b>		
26a. LOCAL REGISTRAR'S SIGNATURE <i>David D. Orr</i>		26b. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) <b>APR 14 2004</b>				