UNOFFICIAL COPY

STATE OF ILLINOI	S)	
)	SS
COUNTY OF COOK)	

DECEASED JOINT TENANT AFFIDAVIT

JOSEPH MOTYKA, being duly sworn on oath, for the purpose of clearing title to the subject property, the legal description of which is attached hereto, deposes and says that:

- 1. He is the nephew of owner Lydia Giese, a spinster, deceased, and that he resides at 1437 West Fletcher Street, Chicago, Illinois 50657.
- 2. That the decement died on April 1, 2001, as evidenced by the attached certified copy of her death certificate.
- 3. That said decedent was one of the owners of the land described in the legal description attached hereto.
- 4. That said decedent died leaving no last will and testament and that it is not anticipated that a probate estate will be opened.

5. That the total value of the decedert's estate at the time of her death for Federal Estate Tax and Illinois Inheritance Tax purposes did not exceed \$100,000.

JOSEPH MOTYK

SUBSCRIBED AND SWORN TO THIS

DAY OF OCTOBER, 2007.

NOTARY PUBLIC

RETURN TO:

JOSEPH A. SEMERLING

3805 NORTH LINCOLN AVENUE

CHICAGO, ILLINOIS 60613

ø/3ø26ø**9**46

Doc#: 0730260046 Fee: \$50.00 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds Date: 10/29/2007 11:50 AM Pg: 1 of 3

0730260046 Page: 2 of 3

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LEGAL DESCRIPTION

Lot 103 in John P. Altgeld's subdivision of Blocks 1, 2, 3, 4, 7, and the North ½ of Block 6 in the subdivision of that part lying North Easterly of the Center Line of Lincoln Avenue of the North West 1/4 of Section 29, Township 40 North, Range 14, East of the Third Principal Meridian in Cook County, Illinois.

PIN # 14-29-105-007-0000

Commonly Known As: 1437 West Fletcher Street
Chicago, illipois 60657

FUNERAL DIRECTOR tantal effect 6 kgs OCAL REGISTHAN'S SIGNATU MAKE VIEW FUNERAL HOME 1458 W BELMONT AVE. MATURE Missis Daniertment of Public Health -- Division of VIII Records CHICAGO, 11 DATEFILEDBYLOCAL FUNERAL DIRECTOR SILLINOIS LICENSE NUMBER 011640 60657 APR

FUNERAL HOME REMOYAL REFEREN

24b.

CEMETERY OR CREMATORY-NAME

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ST LUKE CEMETERY

STREET AND NUMBER OR R F D

24c. LOCATION

CHICAGO, ILLINOIS

NAOL BO ALIO

PAMOL BO ALIC

STATE

NOTE: IF ANINJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED

APRIL 4,

2001

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22d Q36-089472

ILLINOIS LÍCENSE NUMBER

10/11/2

NAME AND ADDRESS

P.CERTIFIEF

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MICTON

60657

OR PRINT

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* ATTENDING PHYSICIAN IF OTHER THAN CENTIFIER

ATHERINE

22a.SIGNATURE 🏽

TO THE BEST OF MY KNOWLEDGE, DENTH OCC

RREDATTHE TIME, DATE AND PLACE / APO QUE TO THE CAUSE(S) STATED

215

DATE SIGNED

G

. **7**

MONTH DAY YEAR)

EXAMINER NOTIFIED? (YES N

(YES NO)

20c.

YES! NOT

HOUR OF DEATH

(YES NO)

19a.

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19b.

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A TO LAST SAW HIM/HER ALIVE ON

TATE OF OPERATION, IF ANY

MAJOR FINDINGS OF OPERATION

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART?

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WHICH GIVE RISE TO

9

MMEDIATE CAUSE (a)

AFFIXED. MULTICOLOR SIGNATURE SEAL IS THIS CERTIFICATE COPY VALID WHEN

IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? WERE AUTOPSY FINDINGS AVAILABLE PRICHTO
COMPLETION OF CAUSE OF DEATH 1, NES NO. The Section Willelm, no LOCAL REGISTRAR

OF ILLINOIS AND THE ORDINANCES OF KEPT BY ME IN ORDINANCE OF SAID SHEET IS A TRUE COPY OF A RECORD ACCOMPANYING CERTIFICATE ON THIS THE CITY OF CHICAGO; THAT THE BY VIRTUE OF THE LAWS OF THE STATE AND DEATHS FOR THE CITY OF CHICAGO THE RECORDS OF BIRTHS, STILLBIRTHS CERTIFY THAT I AM THE KEEPER OF **FEGISTRAR OF VITAL STATISTICS OF** LAW AND ORDINANCES. THE CITY OF CHICAGO, DO HEREBY NUMBELM M.D., LOCAL

APR 03 2001

CITY OF CHICAGO STATE OF ILLINOIS COUNTY OF COOK

DISTRICT NO.

DEPARTMENT OF PUBLIC HEALTH CITY OF CHICAGO

07302600<u>46</u> Page

17a.

Mottheus

S NAME (TYPE OR PRINT

ROBERT GIESE

diate Cause (Final ung in death)

Enter the diseases, or complications that caused the death. Do not enter the mode of dying, such as cardaed respire topy prest shock, or heart failure. List only one cause on each line.

se or condition

DUE TO, OR AS A CONSEQUENCE OF

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AD FrocARCINDMA

(FILLMARY (WK. NOWN

(a)

DUETO, OR AS A CONSEQUENCE OF

3 of 3

SIDENCE (STREET AND NUMBER) 324 16 2432

1437 W.

FLETCHER ST.

ZIP CODE

₁₃60657

HACE (WHITE, BLACK, AMERICAN INDIAN, BIG LISPECIFY)
14a, WHITE

13b

CHICAGO

OF HISPANIC ORIGIN? (SPECIFY NOORYES-IF YES SPECIFY CUBAN MEXIC TO PUERTO RICAN GIC

SPECIFY:

MIDDLE

YESNOYES

13d.

COOK

INSIDE CITY

COUNTY

MIDDLE

LAST

MOTHER-NAME

SHIS ☐ YES

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SCHENDEL

(STREET AND NO ORRED

OWN STATE ZIP,

APPROAMATE INTERVAL BETWEEN ONSET AND DEATH

10657

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LLINOIS

SOCIAL SECURITY NUMBER

BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)

MARRIED NEVER MARRIED (SPECIFY)
Ba. NEVER MARRIED

BUHAVOCATE

HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)

NAME OF SURVIVING SPOUSE (MAIDEN NAME IF WIFE)

SIONI

MasoNIC

60 IMPATIENT OPEMER AM INPATIENT (SPECIFY)

WAS DECEASED EVER IN U.S ARMED FORCES? (YES NO)

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SECRETARY

CITY, TOWN, TWP, OR ROAD DISTRICT NO

KINDOF BUSINESSOR INDUSTRY <u>EDUCATION ISPECIFY ONLY PHONEST GRADE COMPLETED</u>

REAL ESTATE OFFICE-mentary Secondary (3-12) COMPLETED COMPLETED

CHICAGO, IL

CITY, TOWN, TWP, OR ROADDISTRICT NUMBER

COOK

BIRTHDAY (YRS)

CHICA60

COUNTY OF DEATH

DECEASED-NAME NUMBER

REGISTERED

MEDICAL CERTIFICATE

OF DEATH

NUMBER -

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PRIL

HINCH, HIABO

DATE OF BIRTH JUDITH DAY YEAR

JULY 31,

1921

STATE OF ILLINOIS

MIDDLE