39200/20100/

UNOFFICIAL CO

After recording: Mail to: **Becky Ruggiero** 2916 W. Foster # 2W Chicago, Illinois 60625



1031240035 Fee: \$38.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 11/08/2010 10:32 AM Pg: 1 of 2

State of Illinois

) SS

County of Cook)

JOINT TENANCY AFFIDAVIT

BECKY RUGGIFPO, hereby referred to as the affiant, states under oath that the affiant resides at 2916 W. Foster Avenue #2W Chicago, Illinois 60625; that the affiant was acquainted with Yuriko Saathoff, the decedent, who at the arrie of her death was one of the owners of the property, by virtue of a properly recorded joint tenancy Leed, said property located in Chicago, Cook County, Illinois, and legally described as follows:

Lot 164 in Big Oaks Subdivision being a Subdivision in the South 1/2 of Section 7, Township 40 North, Range 13, East of the Third Principal '4e idian, in Cook County, Illinois.

and commonly known as 4908 N. Newcastie, Chicago, IL 60656

PIN: 13-07-328-028-0000

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 or the creation of interests to take effect in possession or enjoyment after death.

The decedent died on October 30, 2006, leaving no last will and testame at; a true and conforming copy of her death certificate is attached hereto and made a part hereof.

The total value of decedent's estate including the taxable interest in the above property was \$ 100,000, and that the value of the above property individually was \$ 29,000.

That no State inheritance or other succession tax or Federal Estate tax became due.

That all known claims against the estate of Yuriko Saathoff and/or the decedent have been paid, or are barred by the statute of limitations.

Becky Ruggier

Daughter of Yuriko Saathoff

Subscribed and sworn to before me this

5 day of October 20

Notary Public

OFFICIAL SEAL

RICHARD A. HIRSCHENBEIN

Notary Public - State of Illinois

This instrument was prepared by: Richard A. Hirschenbelm, 7742 W. Higgins, #C-102, Chicago, IL 60631

Attorneys' Title Guaranty Fund, Inc. 1 S Wacker Rd., STE 2400 C luago, " 50605-4030

Attn:Search Department

1031240035 Page: 2 of 2

CERTIFICATION OF DEATH RECORD

CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

TATE FILE NUMBER 2018 001 1001			DATE ISSUED 02/18/2010
DECEDENTSLEGAL NAME MELVIN K SAATHOFF JR		er outsite and section the transfer of the contract of the con	OF DEATH PRUARY 11, 2010
COUNTY OF DEATH	AGE AT LAST BIRTHDAY 74 YEARS	DATE OF BIRTH JULY 26, 1935	On the Control of the
CITY OR TOWN CHICAGO	1 10 10 10 10 10 10 10 10 10 10 10 10 10	HER INSTITUTION NAME TION MEDICAL CENTER	
PLACE OF DEATH INPATIENT			
BIRTHPLACE SOCIAL SECTION OF STATE OF S	MARITAL STATUS AT TIME OF DE	EATH SURVIVING SPOUSE'S NAME	EVER IN U.S. ARMED FORCES? YES
RESIDENCE 4908 NORTH NEWCASSILE	estification destination (estimated performance) and the contraction of the contraction o	TY OR TOWN CHICAGO	WISIDE CITY LIMITE? YES
COUNTY S'ATI ZIP CO	resolution in the second of th	MOTHER'S NAME PRIOR CHARLOTTE SV	
INFORMANT'S NAME BECKY RUGGIERO	RELATIONSHIP DAUGHTER	MAILING ADDRESS 2916 WEST FOSTER AVENUE APT2W, CI	IICAGO, IL, 60625
	A JE OF DISPOSITION LIMWOOD CEMETERY	LOCATION - CITY OR TOWN AND STATE RIVER GROVE, IL	DATE OF DISPOSITION FEBRUARY 15, 2010
FUNERAL HOME LAWRENCE FUNERAL HOME: 4800 P	NORTH AUSTIN AVENUE, CHICAGO, IL	. 60630	
FUNERAL DIRECTOR'S NAME STEPHANIE MARIE BROWN		·	LINOIS LICENSE NUMBER
LOCAL REGISTRAR'S NAME DAVID ORIR		DATE FILED WITH LOCAL FEBRUARY 16, 2	
CAUSE OF DEATH PART I ISCHEMIC I	HEART DISEASE		YEARS
(Final disease or condition resulting in ideath) b. BILATERAL	Digitio (or as a course uses to 69).		YEARS
	Chile to (or its a completionous or):		IE-No
PART II. Enter other elgalificant conditions contribu	(Pier to for an a scribequence of thing so shooth but not reculting in the underlying coules	OWNER PART WAS AN AUT	OPSY PERFORMED? NO
			PRY FINDINGS USED TO LAUSE OF DEATHY NVA
DID TOBACCO USE CONTRIBUTE TO DEATH?	FÉMALE PREGNANCY STATUS NOT APPLICABLE	W NNER OF	DEATH
DATE OF MURY	TIME OF INJURY PLACE OF INJURY		MJURY AT WORK?
LOCATION OF INJURY			
DESCRIBE HOW INJURY OCCURRED:		I F π	LANSPURY, TION INJURY, SPECIFY:
ATTEND THE DECEASED? DATE LAST SEEN	STORES TO STORE AND ALLEY AND ALLEY OF THE ALLEY AND ALL	DÄTE PRONOUNCED	TIME OF DEATH 03:21 PM
CERTIFIER PHYSICIAN			E CERTIFIED EBRUARY 12, 2010
NAME, ADDRESS AND ZIP CODE OF PERSON COM	PLETING CAUSE OF DEATH L ROAD, ARLINGTON HEIGHTS, ILLING		PHYSICIAN'S LICENSE NUMBER 036087074



This is to certify that this is a true and correct copy from the official death record filed with Illinois Department of Health.



