

UNOFFICIAL COPY

DECEASED JOINT TENANCY AFFIDAVIT

THIS INSTRUMENT PREPARED
BY AND MAIL TO:
Martin J. Lillig
Lillig & Thorsness, Ltd.
1900 Spring Road, Suite 200
Oak Brook, IL 60523



Doc#: 1111013034 Fee: \$40.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 04/20/2011 02:04 PM Pg: 1 of 3

This space for recorder's use only

SALLY V. NEUERT, being duly sworn states, as follows:

That she resides at 2651 Goldenrod, Glenview, Illinois 60026.

That she was married to WILLIAM F. NEUERT, deceased, who at the time of his death was one of the owners of the land in Cook County, Illinois, described as:

Parcel 1: Lot 205 in Cambridge at the Glen being a subdivision of Lot 14 in Glenview Naval Air Station subdivision No. 2 in Section 22, Township 42 North, Range 12, East of the Third Principal Meridian, in Cook County, Illinois, according to the Plat thereof recorded June 4, 2001 as Document Number 0010477724.

Parcel 2: A non-exclusive perpetual easement for ingress and egress for the benefit of Parcel 1 as set forth in the Declaration for Cambridge at the Glen dated June 27, 2001 and recorded August 6, 2001 as Document 0010713243 over outlots D, E and T in Cambridge at the Glen, aforesaid.

Permanent Index No.: 04-22-206-029-0000

Property Address: 2651 Goldenrod, Glenview, Illinois 60026

That the deceased died on March 30, 2011, as evidenced by a copy of death certificate of the deceased attached hereto.

That the deceased died:

Leaving no Last Will & Testament.

Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of Cook County, Illinois about April 18, 2011.

That the total value of the estate of the deceased, including both real 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 IRC Section 2010 applicable exclusion amount for 2011.

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Affiant makes this affidavit for the purpose of inducing any duly licensed title insurance company to issue its Title Insurance Policy describing the above mentioned property.

Sally V. Neuert
SALLY V. NEUERT

SWORN AND SUBSCRIBED to before
me this 18th day of April, 2011.

Loral Deroose
NOTARY PUBLIC



Property of Cook County Clerk's Office

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CERTIFICATION OF DEATH RECORD
UNOFFICIAL COPY

COOK COUNTY CLERK VITAL RECORDS
CHICAGO, ILLINOIS
MEDICAL CERTIFICATE OF DEATH

DATE ISSUED 04/06/2011

STATE FILE NUMBER 2011 0025095

DECEDENT'S LEGAL NAME WILLIAM F NEUERT III		SEX MALE	DATE OF DEATH MARCH 30, 2011	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 57 YEARS	DATE OF BIRTH OCTOBER 04, 1953		
CITY OR TOWN GLENVIEW		HOSPITAL OR OTHER INSTITUTION NAME GLENBROOK HOSPITAL		
PLACE OF DEATH EMERGENCY ROOM / OUTPATIENT				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER	MARITAL STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE'S NAME SALLY VOGEL	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 2651 GOLDENROD LANE	APT. NO.	CITY OR TOWN GLENVIEW	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60026	FATHER'S NAME WILLIAM F NEUERT JR	MOTHER'S NAME PRIOR TO FIRST MARRIAGE LOUISE PERCY
INFORMANT'S NAME SALLY NEUERT		RELATIONSHIP WIFE	MAILING ADDRESS 2651 GOLDENROD LANE, GLENVIEW, IL, 60026	
METHOD OF DISPOSITION CREMATION	PLACE OF DISPOSITION NORTH SHORE CREMATION CARE	LOCATION - CITY OR TOWN AND STATE SKOKIE, IL	DATE OF DISPOSITION APRIL 02, 2011	
FUNERAL HOME N.H. SCOTT & HANEKAMP, 1240 WAUKEGAN ROAD, GLENVIEW, IL, 60025				
FUNERAL DIRECTOR'S NAME ELIZABETH WALLER			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015993	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR APRIL 1, 2011	
CAUSE OF DEATH		PART I	MINUTES	
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.		
		b.		
		c.		
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I		WAS AN AUTOPSY PERFORMED? NO		
		WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A		
DID TOBACCO USE CONTRIBUTE TO DEATH?		FEMALE PREGNANCY STATUS NOT APPLICABLE		MANNER OF DEATH NATURAL
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY		INJURY AT WORK?
LOCATION OF INJURY				IF TRANSPORTATION INJURY, SPECIFY:
DESCRIBE HOW INJURY OCCURRED:				
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE JANUARY 04, 2011	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 11:46 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED MARCH 31, 2011	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR. KIM LEUNG STONE, 2501 COMPASS DR., GLENVIEW, ILLINOIS, 60026			PHYSICIAN'S LICENSE NUMBER 036-070938	

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

David Orr
 David Orr
 Cook County Clerk



THE WORD VOID APPEARS WHEN PHOTOCOPIED