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STATE OF ILLINOIS)
)SS.
COUNTY OF COOK)

Doc#: 1209634087 Fee: \$42.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 04/05/2012 03:15 PM Pg: 1 of 3

JOINT TENANCY AFFIDAVIT

JACQUELINE SCHACHT, hereby referred to as the affiant, states under oath that the affiant resides at 5143 N. Kenton Avenue, in the City of Chicago, Illinois; that the affiant was acquainted with **ELEANOR SOCHA**, the decedent; that at the time of death, the decedent was one of the owners of the property, by virtue of a properly recorded Quit Claim Deed in Joint Tenancy, said property, located in Cook County, Illinois, and legally described as per the attached:

Address of Property: 5327 N. Lynch Ave., Chicago, IL 60630
Parcel Number: 13-09-115-005-0000

That 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;

That the decedent died on January 14, 2011, as evidenced by a certified copy of her death certificate attached hereto, leaving a last will and testament filed February 12, 2011;

That the Illinois Estate Tax and the Federal Estate Tax, if any was due from the decedent's estate has been paid in full.

That the affiant makes this affidavit to induce Attorney's Title Guaranty Fund, Inc. to issue its policy of title insurance on the above described property.

The affiant hereby covenants and agrees, for himself/herself/themselves, heirs, personal representatives or assignees, to forever fully indemnify, protect, defend and hold Attorneys' Title Guaranty Fund, Inc. harmless and to reimburse The Fund for all loss, costs, damages, suits, attorney's fees and expenses of every kind and nature which The Fund 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 **ELEANOR SOCHA**, the decedent;
2. Illinois Estate Inheritance Tax and Federal Estate Tax which may be charged against the estate of said decedent;
3. Legacies, if any, created by the will of said decedent;
4. Rights of contribution.

Jacqueline Schacht
JACQUELINE SCHACHT

Subscribed & Sworn to before me this 21 day of MARCH, 2012

[Signature]
Notary Public

Affidavit prepared by and return to:
Michael J. Cornfield
6153 N. Milwaukee Ave., Chicago, IL 60646



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LEGAL DESCRIPTION

An undivided one-half (1/2) interest in:

LOT 5 IN A. F. HALLMAN'S SUBDIVISION OF BLOCK 2 IN A. G. WINSTON'S JEFFERSON PARK AND FOREST GLEN ADDITION TO CHICAGO, A SUBDIVISION OF LOT 3 OF THE SUBDIVISION BY THE EXECUTORS OF THE ESTATE OF SARAH ANDERSON, DECEASED, IN THE SOUTHEAST ¼ OF THE NORTHWEST FRACTIONAL ¼ OF SECTION 9, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Parcel Number: 13-09-115-005-0000

Address of real estate: 5337 N. LYNCH, CHICAGO, IL 60630

Property of Cook County Clerk's Office

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

STATE FILE NUMBER 2011 0003681

DATE ISSUED 01/19/2011

DECEDENT'S LEGAL NAME ELEANOR J SOCHA			SEX FEMALE	DATE OF DEATH JANUARY 14, 2011
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 94 YEARS	DATE OF BIRTH APRIL 18, 1916		
CITY OR TOWN PARK RIDGE		HOSPITAL OR OTHER INSTITUTION NAME RAINBOW HOSPICE ARK		
PLACE OF DEATH HOSPICE FACILITY				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER	MARITAL STATUS AT TIME OF DEATH WIDOWED	SURVIVING SPOUSE'S NAME	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 5337 N LYNCH	APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60630	FATHER'S NAME BERNARD JELONEK	MOTHER'S NAME PRIOR TO FIRST MARRIAGE PAULINE KAMINSKI
INFORMANT'S NAME JACQUELINE SCHACHT		RELATIONSHIP DAUGHTER	MAILING ADDRESS 5143 N KENTON, CHICAGO, IL, 60630	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION SAINT ADALBERT CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE NILES, IL	DATE OF DISPOSITION JANUARY 17, 2011	
FUNERAL HOME MATZ FUNERAL HOME CHICAGO, 3440 N CENTRAL AVENUE, CHICAGO, IL, 60634				
FUNERAL DIRECTOR'S NAME ROBERT D LAWLER			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034010642	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR JANUARY 18, 2011	
CAUSE OF DEATH PART I. BOWEL OBSTRUCTION				
IMMEDIATE CAUSE <small>(Final disease or condition resulting in death)</small>		a. _____ Due to (or as a consequence of)		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
		b. _____ Due to (or as a consequence of)		
		c. _____ Due to (or as a consequence of)		
PART II. Enter other <i>significant conditions contributing to death</i> 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 TORACCO 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				
DESCRIBE HOW INJURY OCCURRED.				IF TRANSPORTATION INJURY, SPECIFY
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE JANUARY 13, 2011	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 06:20 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED JANUARY 14, 2011	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH RICHARD WOLFE, 1601 N WESTERN, PARK RIDGE, ILLINOIS, 60068				PHYSICIAN'S LICENSE NUMBER 036105593

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: FACILE SECURITY HOLOGRAPHIC FOILS AT BOTTOM

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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE