



ATTORNEYS' TITLE GUARANTY FUND, INC.



Doc#: 1221204030 Fee: \$42.00 Eugene "Gene" Moore RHSP Fee: \$10.00 Cook County Recorder of Deeds Date: 07/30/2012 09:48 AM Pg: 1 of 3

5-25-2012 1/2

JOINT TENANCY AFFIDAVIT

STATE OF IL) COUNTY OF Cook) SS

DIANE GUIDO, hereby referred to as the affiant, states under oath that the affiant resides at ; that the affiant was acquainted with PATRICIA L. LOTTER; at the time of the decedent's death, the decedent was one of the owners of a parcel of property by virtue of a properly recorded joint tenancy or tenancy by the entirety deed, said property located in COOK County, Illinois, and legally described as follows:

Parcel 1: Unit 2977-D together with its undivided percentage interest in the common elements in the Huntington Club I Condominium as delineated and defined in the Declaration recorded as Document No. 94839137, of Sections 5 and 8, Township 41 North, Range 10, East of the Third Principal Meridian, in Cook County, Illinois.

Parcel 2: Easements appurtenant to and for the benefit of Parcel 1 as set forth and defined in the Declaration of Easements recorded as Document No. 25214474 and LR3143390 for ingress and egress, all in Cook County, Illinois.

Parcel 3: Easements appurtenant to and for the benefit of Parcel 1 as set forth and defined in the Declaration of Easements recorded as Document No. 93943916 for the purposes set forth therein, all in Cook County, Illinois. Permanent Index Number(s): 07-08-109-072-1022 Property Address: 1977 Kenilworth Cir., Unit D, Hoffman Estates, IL 60169

The decedent died on 3/26/2012 no last will and testament;

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 total value of decedent's estate, including the taxable interest in the above property, is 0.00, and that the value of the above property individually is 62,000.00;

The State 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.

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 PATRICIA L. LOTTER, deceased, 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.

Attorneys' Title Guaranty Fund, Inc. 1 S. Wacker Dr., STE 2400 Chicago, IL 60606-4650 Title Search Department

Handwritten notations: S, P, Y, 3, SC, INT, and a signature.

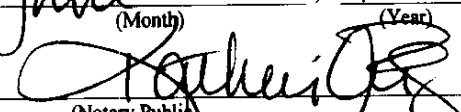
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JOINT TENANCY AFFIDAVIT

(continued)


DIANE GUIDO

Subscribed and sworn to before me this

29 day of June, 12
(Month) (Year)

(Notary Public)



My commission expires: _____

Note: If the decedent left a will, a certified copy thereof must be presented to ATG for inspection, along with a certified copy of the death certificate and evidence of payment of death taxes, if any.

This instrument prepared by:
JOHN T. CLERY
1111 PLAZA DRIVE #580
SCHAUMBURG, IL 60173

Return to:
JOHN T. CLERY
1111 PLAZA DRIVE #580
SCHAUMBURG, IL 60173

Property of Cook County Clerk's Office

UNOFFICIAL COPY

CERTIFICATION OF DEATH RECORD

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

STATE FILE NUMBER 2012 0023282

MEDICAL EXAMINER'S CASE NUMBER 429 MAR 12

DATE ISSUED 04/02/2012

DECEDENT'S LEGAL NAME PATRICIA L LOTTER			SEX FEMALE	DATE OF DEATH MARCH 26, 2012
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 63 YEARS	DATE OF BIRTH MAY 31, 1948		
CITY OR TOWN HOFFMAN ESTATES		HOSPITAL OR OTHER INSTITUTION NAME 1977 KENILWORTH		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE OAK PARK, IL	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH WIDOWED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 1977 KENILWORTH	APT. NO. D	CITY OR TOWN HOFFMAN ESTATES	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60139	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION BRUCE FLOISTAD	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION PEARL HANSEN
INFORMANT'S NAME DIANE GUIDO		RELATIONSHIP DAUGHTER	MAILING ADDRESS 316 MEGAN ANN CT, GENEVA, IL, 60134	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION FAIRVIEW MEMORIAL PARK	LOCATION - CITY OR TOWN AND STATE NORTHLAKE, IL	DATE OF DISPOSITION MARCH 31, 2012	
FUNERAL HOME HUMES FUNERAL HOME, 320 WEST LAKE, ADDISON, IL, 60101				
FUNERAL DIRECTOR'S NAME JOHN W HUMES III			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016197	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR MARCH 28, 2012	
CAUSE OF DEATH PART I. CHRONIC ALCOHOLISM			UNKNOWN UNKNOWN	
IMMEDIATE CAUSE (Final disease or condition resulting in death)				
a. _____ Due to (or as a consequence of):				
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	
FEMALE PREGNANCY STATUS UNKNOWN			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?	DATE LAST SEEN ALIVE	WAS MEDICAL EXAMINER OR CORONER CONTACTED?	DATE PRONOUNCED MARCH 26, 2012	TIME OF DEATH 09:59 PM
CERTIFIER MEDICAL EXAMINER/CORONER			DATE CERTIFIED MARCH 27, 2012	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH NANCY L JONES MD, 2121 W HARRISON ST, CHICAGO, IL, 60612			PHYSICIAN'S LICENSE NUMBER	

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

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: FACILE SECURITY PHOTOGRAPHIC POLS AT BOTTOM