

Doc#: 1333149024 Fee: \$48.00 RHSP Fee: \$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 11/27/2013 11:07 AM Pg: 1 of 6

DECEASED JOINT TENANCY AFFIDAVIT

MAIL TO:

IRA JAY COHEN Attorney At Law 675 N. North Court, Suite 490 Palatine, Illinois 60067

NAME & ADDRESS OF TAXPAYER.

NANCY M. SHOLDICE 502 Huntington Commons Rd. Apartment 434 Mount Prospect, Illinois 6,0056

STATE OF ILLINOIS

S(3

COUNTY OF COOK

ROBERT ARNOTT, being first duly sworn states as follows:

- 1. My name is ROBERT ARNOTT. I am of legal age. I reside at 1246 Shade Tree Lane, Janesville, Wisconsin 53545.
- 2. I have personal knowledge of the matters alleged berein; and if called as a witness, I could competently testify thereto.
- 3. NANCY M. SHOLDICE is my sister. Since September 30. 2013, I am and have been the duly appointed plenary guardian of the estate and person of NANCY M. SHOLDICE in the Circuit Court of Cook County, Illinois, in the estate entitled: *Nancy Skoidice, A Disabled Person, under number 2013 P 004843* (the "ESTATE"). A certified copy of the Letters of Office, Plenary Guardian of Estate of Disabled Person that the Court issued to me in the ESTATE on September 30, 2013, are marked as Exhibit "1", attached hereto and racde a part hereof.
- 4. WILLIAM J. SHOLDICE died on October 10, 2006. A certified copy of the State of Illinois Medical Certificate of Death of WILLIAM J. SHOLDICE, is marked as Exhibit "A", attached hereto and made a part hereof.
- 5. At the time of his death, the decedent, WILLIAM J. SHOLDICE, was married to NANCY M. SHOLDICE.
- 6. At the time of his death, the decedent, WILLIAM J. SHOLDICE, was one of the owners of the following described Real Estate situated in the County of Cook, in the State of Illinois, to wit:

PARCEL 1: UNIT NO. 434 AS DELINEATED ON SURVEY OF THE FOLLOWING DESCRIBED REAL ESTATE (HEREIN REFERRED TO AS "PARCEL"):

THAT PART OF LOT 1 IN KENROY'S HUNTINGTON, BEING A SUBDIVISION OF PART OF THE EAST 1/2 OF SECTION 14, TOWNSHIP 41 NORTH, RANGE 11, EAST OF THE THIRD PRINCIPAL MERIDIAN, WHICH SURVEY IS ATTACHED AS EXHIBIT "B" TO "DECLARATION OF CONDOMINIUM OWNERSHIP AND OF EASEMENTS, RESTRICTIONS AND COVENANTS FOR CONDOMINIUMS OF HUNTINGTON COMMONS APARTMENT HOMES - SECTION NO. 2 CONDOMINIUM" (HEREIN CALLED "DECLARATION OF CONDOMINIUM"), MADE BY AMERICAN NATIONAL BANK AND TRUST COMPANY OF CHICAGO, A NATIONAL BANKING ASSOCIATION, NOT PERSONALLY BUT SOLELY AS TRUSTEE UNDER TRUST AGREEMENT DATED JULY 1, 1973 AND KNOWN AS TRUST NO. 77838 RECORDED IN THE OFFICE OF THE COOK COUNTY RECORDER OF DEEDS ON DECEMBER 4, 1974 AS DOCUMENT NO. 22924236 AND AS AMENDED BY AMENDMENT TO SURVEY RECORDED IN THE OFFICE OF THE COOK COUNTY RECORDER OF DEEDS ON MAY 28, 1975 AS DOCUMENT NO. 23095552, TOGETHER WITH AN UNDIVIDED .8922 PERCENT INTEREST IN SAID PARCEL (EXCEPTING FROM SAID PARCEL A.L THE UNITS THEREOF AS DEFINED AND SET FORTH IN SAID DECLARATION OF CONDOMINIUM AND SURVEY.

PARCEL 2: PARTY OF THE FIRST PART ALSO HERFBY GRANTS TO PARTIES OF THE SECOND PART, THEIR **SUCCESSORS** AND ASSIGNS, AS RIGHTS AND EASEMENTS APPURTENANT TO THE ABOVE DESCRIBED REAL ESTATE, THE RIGHTS AND EASEMENTS FOR THE BENEFIT OF SAID PROPERTY SET FORTH IN THE AFOREMENTIONED DECLARATION OF CONDOMINIUM ΙN THE "DECLARATION OF COVENANTS, CONDITIONS, RESTRICTIONS AND EASEMENTS FOR THE CONDOMINIUMS OF HUNTINGTON **COMMONS** HOMEOWNERS' ASSOCIATION" DATED SEPTEMBER 17, 1973 AND RECORDED IN THE OFFICE OF THE COOK COUNTY RECORDER OF DEEDS ON OCTOBER 2, 1973, AS

DOCUMENT NO. 22499659 AND THE "SUPPLEMENTAL DECLARATION OF COVENANTS, CONDITIONS. RESTRICTIONS AND **EASEMENTS** FOR THE CONDOMINIUMS OF HUNTINGTON **COMMONS** HOMEOWNERS' ASSOCIATION" DATED OCTOBER 1, 1974 AND RECORDED IN THE OFFICE OF THE COOK COUNTY RECORDER OF DEEDS ON DECEMBER 4, 1974 AS DOCUMENT NO. 22924234 (HEREIN COLLECTIVELY CALLED "DECLARATION OF EASEMENTS"), AND PARTY OF THE FIRST PART RESERVES TO ITSELF, ITS SUCCESSORS AND ASSIGNS, THE RIGHTS AND FASEMENTS SET FORTH IN THE DECLARATION OF CONDOMINIUM AND THE DECLARATION OF EASEMENTS FOR THE BENEFIT OF THE REMAINING PROPERTY DESCRIPED THEREIN.

PARCEL 3: PARTY OF THE FIRST PART ALSO HEREBY GRANTS TO PAKINES OF THE SECOND PART, THEIR SUCCESSORS AND ASSIGNS, AS **RIGHTS** EASEMENTS APPURITIONANT TO THE ABOVE DESCRIBED REAL ESTATE, THE RIGHTS AND EASEMENTS FOR THE BENEFIT OF SAID PF OPERTY SET **FORTH** DECLARATION OF EASEMENT DATED FEBRUARY 11, 1971, AND RECORDED AND FILED FEBRUARY 19, 1971, AS DOCUMENT NO. 21401332 AND AS LE L'OCUMENT 2543467 MADE BY LASALLE NATIONAL BANK, NPA AS TRUSTEE UNDER TRUST NOS. 33425, 35280, 19237 AND 28948 AND BY EASEMENT AGREEMENT AND GRANT DATED AUGUST 23, 1971, AND RECORDED AUGUST 24, 1971, AS DOCUMENT NO. 21595957 AND AS AMENDED BY AMENDMENT RECORDED MARCH 7, 1972, AS DOCUMENT NO. 21828994 MADE BY LASALLE NATIONAL BANK, NEA, AS TRUSTEE UNDER TRUST NOS. 42301 AND 28948, AND PARTY OF THE FIRST PART RESERVES TO ITSELF, ITS **SUCCESSORS** AND ASSIGNS. THE RIGHTS **EASEMENTS SET FORTH** IN THE **AFORESAID** DECLARATION OF EASEMENT FOR THE BENEFIT OF THE REMAINING PROPERTY DESCRIBED THEREIN.

Permanent Index Number: 08-14-401-080-1093

Address of Real Estate: 502 Huntington Commons Road

Apartment 434

Mount Prospect, Illinois 60056

7. The decedent, WILLIAM J. SHOLDICE, died leaving a Last Will and Testament, which was filed with the Clerk of the Circuit Court Probate Division of Cook County, Illinois, on October 26, 2006.

8. The total value of the estate of the decedent, WILLIAM J. SHOLDICE, including both real and personal property owned by the decedent, WILLIAM J. SHOLDICE, either individually or in joint tenancy at the time of the death of the decedent, WILLIAM J. SHOLDICE, did not exceed the sum of \$110,000.00.

ROBERT ARNOTT

Signed and sworn to before me by ROBERT ARNOTT, this

____ day .

NOTARY PUBL

Official Seal
Notary Public State of Illinois
Applies 08/01/2016

This instrument was prepared by:

IRA JAY COHEN Attorney at Law 675 N. North Court, Suite 490 Palatine, Illinois 60067 (847) 705-1300

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UNOFFICIAL (Rev. 12/22/03) CCP 0205

LETTERS OF OFFICE - PLENARY GUARDIAN OF ESTATE OF A DISABLED PERSON

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS COUNTY DEPARTMENT-PROBATE DIVISION

Estate of

NANCY SHOLDICE

2013 P 004843 Docket A Disabled Person

LETTERS CF OFFICE-PLENARY GUARDIAN OF ESTATE OF A DISABLED PERSON

ROBERT ARNOT	T	has been appointe
plenary guardian of the es	tate and person or	NANCY SHOLDICE
a disabled person, a	nd is authorized to hav	e the care, management and investment of the ward's estat
·····	and the custody of the wa	and to do all acts required by law
LS		WITNESS <u>September 30, 2013</u>
LS		Dorothy Brown
		Clerk of the Circuit Court
		CERTIFICATE of the letters of office now in force in this estate.
jmt		WITNESS, September 30, 2013
		Dorothy Grown ClerkofCourt
DOROTHY BRO	WN, CLERK OF THE	E CIRCUIT COURT OF COOK COUNTY, ILLINOIS

STATE OF ILLINOIS)
County of Cook)

UNOFFICIAL COPY DAVID ORR, County Clerk

11 4 2006

I. David Orr, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.

IN WITNESS THEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the city of Chicago, in said County.

EXHIBIT "A"

COUNTY CLERK

RTH NO.	REGISTRATION 16.	STATE OF ILLINOIS STATE FILE NUMBER				
	REGISTERED NUMBER	MEDICAL	CERTIFICATE	OF DEA	TH	
t in	DECEASED-NAME	FIRST MIDDLE	LAST	SEX	DATE OF DEATI	H (MONTH, DAY, YEAR)
INK ectors.	1. W1.	Jliam J.	SHOLDICE	2 MALE	3 OCTOBE	R 10,2006
sicians	COUNTY OF DEATH	AGE-LAST	UNDER LYEAR UNDER		RTH (MONTH, DAY	<u>*</u>
for DNS	4 COOK	BIRTHDAY (YRS)	1	MIN	e 7, 1	
	4. COOK CITY, TOWN, TWP, OR ROAD DIST	Ju.	5b. 5c. THER INSTITUTION-NAME (IF NOT	15d. UUI	AND NUMBERS	
	6a. ELK GROVE VIL	LAGE Sb. ALEXIA	N BROTHERS MED	ICAL CENTE	R	IF HOSP, OR INST, INDICATE D.O.A. OP/EMER. RM, INPATIENT (SPECIFY) 6cINPATIENT
ED	BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)	MARRIED, NEV PIMARRIED, WIDOWED, DIVORCED (SPECIFY)	NAME OF SURVIVING SPO	USE (MAIDEN NAME, IF V	VIFE)	WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO)
	7. Chicago, IL	(8a. Marri 😉	8b. Nancy	y Arnot	t	9. NO
	SOCIAL SECURITY NUMBER	Director Of 11a Training	KIND OF BUSINESS OF INC		ON (SPECIFYONLY	YHIGHEST GRADE COMPLETED)
	-2790	11a Training	Chicago 11b. Transit	Elementary/ 12.	Secondary (0-12)	College (1-4 or 5 +)
	RESIDENCE (STREET AND NUMBER)	Cir	VN, TWP, OR ROAD DIST	FRICT NO. LI	NSIDE CITY	COUNTY
	502 Huntingto	on Commons RD	Prognect	t. le	/ES/NOLS	Cook
		CODE RACE (WHITE, BLACK,	J	1	JU.	113d.
ì	Illinois 60	0056 INDIAN, etc.) (SPECIFY)		ORIGIN? (SPECIFYNO)	OR YES-IF YES, SPEC	CIFY CUBAN, MEXICAN, PUERTO RICAN, etc.)
5	13e. 13f.	. 14a. White	e 14b. 🔏 NO	YES S	SPECIFY:	
τs	FATHER-NAME FIRST	MIDDLE LAST	MOTHER-NA	ME FIRST	MIDDLE	(MAIDEN) LAST
_		J. Sholdice	16. Ma	argaret	F	itzgerald
	INFORMANT'S NAME (TYPE OR PRI	NT)		A		
	_{17a.} Nancy Si	holdice	l = Wife 50	Lynting	ton Co	otyortown, state, zip) mmons II 60056
(18. PART I. Enter	the diseases, or complications that caused	d the death. Do not enterth	_n_pros	pect.	11 60056
	T	c, or heart failure. List only one cause on	each ine.	or dylini, fuch as cardia	c or respiratory arr	est, APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
	Immediate Cause (Final disease or condition	As a stin	- Passina	()	•	
	resulting in death)	(a) / 13 / 17 ab 14 -	recon			
	CONDITIONS, IF ANY	DUE TO, OR AS A CONSEQUENCE OF	Λ		V _A	
	WHICH GIVE RISE TO \ \ _	(b) LIVER FZ	uleur_			
	IMMEDIATE CAUSE (a) STATING THE UNDERLYING	DUE TO, OR AS A CONSEQUENCE OF	1 1	11	-4-6	
		(c) Commun	at the many	N DRIA	mes.	
	PART II. Other significant conditions con	ntributing to death but not resulting in the underlying	cause given in PART (0/ 00	AUTOPSY	
i			· ·		(YES/NO)	WERI AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLY JUNIOF CAUSE OF DEATH? (YES/NO)
· · · · · ·	DATE OF OPERATION, IF ANY	MAJOR FINDINGS OF OPERATION			19a. NO	150.
		INCOM INDINGS OF OFERATION			IF FEMAL THREE M	E, WAS THE LEAT REGNANCY IN PAST
·····5	20a.	20b.				YES No
·····[I (DID) (DID NOT) ATTEND THE DEC AND LAST SAW HIM/HER ALIVE ON	CEASED (MONTH, DAY, YEAR)		WASCORONERORA	EDICAL THOUS	ROF DEATH
· · · · · ·]	21a.	10110106		EXAMINERNOTIFIED	,	2.17 p
l	TO THE BEST OF MY KNOWLEDGE	DEATH OCCURRED AT THE DME, DA	TE AND PLACE AND DUE TO THE			3:17 P M.
	22a. SIGNATURE >				PAIL	SIGNED (MONTH, DAY, YEAR)
ER	NAME AND ADDRESS OF CERTIFIE	R (TYPEORPHINIT			22b.	wina
i	m Khlenk	transla for the	ne Dalla		ILLING	OIS LICENSE NUMBER
	NAME OF ATTENDING PHYSICIAN	COLUMN CO	savee		22d.	036 10 5798
ļ		TYPE	ORPRINT)		NOTE:	IF AN INJURY WAS INVOLVED IN THIS
>	23.				DEATH	THE CORONER OR MEDICAL EXAMINER BE NOTIFIED.
ĺ	TILINO VAL (SPECIFY)	METERY OF CREMATORY-NAME	LOCATION	CITYORTOWN	STATE	DATE (MONTH, DAY, YEAR)
.].	24a Cremation 24	b. Monarch	24c Frank	lin Park	TT	$\frac{1}{240}0 - 14 - 06$
ION	FUNERAL HOME		D NUMBER OR R.F.D.	CITY OR TOWN		STATE ZIP
	25a. The Oaks Fu	neral Home 1201	E. Trying D	arla Daa		211
	FUNERAL DIRECTOR'S SIGNATURE	E	ving P		u itasc	ca, Il 60143
l	25b. Th mas	am (1 411	La. 0	į.		NOIS LICENSE NUMBER
1	LOOAL REGISTRAF'S SIGNATURE	The Little	5 × V C)	25c. C		380
- 1	and the first of	$XJ_{i,k}$	7	DATEFI	LEDAYLOCAL REGI	STRAR (MONTH, DAY, YEAR)
L	26a.	111		26b.	Ctak	en 14,200/
1	/R200 (Flev. 5/89)	Illinois Department of Publi	c Health—Division of Vital Recor	ds /	- I/ RASE	DOM 19/9 U.S. STANDARD CERTIFICATE)
				10	7140G	O [