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ATTORNEYS' TITLE GUARANTY FUND, INC.



1335833127

Doc#: 1335833127 Fee: \$40.00 RHSP Fee: \$9.00 RPRF Fee: \$1.00 Karen A. Yarbrough Cook County Recorder of Deeds Date: 12/24/2013 03:07 PM Pg: 1 of 2

130 600 800/98

JOINT TENANCY AFFIDAVIT

STATE OF Hawaii) COUNTY OF Hawaii) SS

Richard Schaefer, hereby referred to as the affiant, states under oath that the affiant resides at 69-555 Waikoloa Beach Dr(#206), Waikoloa, Hawaii; that the affiant was acquainted with Harvey A. Schaefer; 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:

LOT 16 IN LAUDERMILK VILLA A SUBDIVISION IN THE SOUTHEAST 1/4 OF SECTION 34, TOWNSHIP 42 NORTH, RANGE 11, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Permanent Index Number(s): 03-34-405-004

Property Address: 217 N. MAPLE ST., MOUNT PROSPECT, IL 60056

The decedent died on 9/26/1982 leaving a last will and testament dated 6/8/72 Filed with Cook County Circuit Court Clerk as Doc 82 W 41-1408

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 , and that the value of the above property individually is under \$ 150,000

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 and clear of the following objections:

- 1. Claims against the estate of Harvey A. Schaefer, 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.

A.T.G.F., INC.

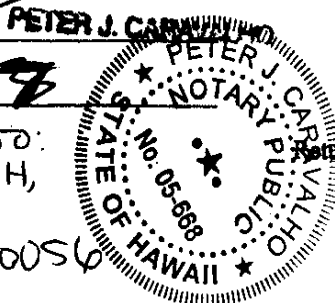
Subscribed and sworn to before me this

15 day of November, 2013

Richard Schaefer (Signature)

SPS (Vertical stamp)

Peter J. Carvalho (Notary Signature)



Doc. Date: 11/15/13 # Pages: 1 Peter J. Carvalho Doc. Description: Joint Tenancy Affidavit

Notary Signature (Signature) NOTARY CERTIFICATION (Stamp) DATE: NOV 15 2013

This instrument prepared by: Return to: Edmund J. Wohlmut, 115 Semason St, Mt. Prospect, IL 60056

UNOFFICIAL COPY

DISTRICT NO. 44.5
REGISTERED NUMBER 263
DECEASED NAME HARVEY A. SCHAEFER
STATE OF ILLINOIS
CORONER'S CERTIFICATE OF DEATH
STATE FILE NUMBER

1. RACE: White
2. SEX: Male
3. DATE OF DEATH: September 26, 1982
4. ETHNIC ORIGIN: American
5. AGE: 64
6. DATE OF BIRTH: March 12, 1918
7. PLACE OF BIRTH: Libertyville, Illinois
8. CITIZENSHIP: U.S.A.
9. OCCUPATION: Engineer
10. MARRIAGE STATUS: Married
11. SURVIVING SPOUSE: June Willie Cook
12. HOSPITAL: Condell Memorial Hospital
13. BUSINESS OR INDUSTRY: Gas Co.
14. VETERAN STATUS: Yes
15. SOCIAL SECURITY NUMBER: [Redacted]16. MOTHER: Ottilie Freund
17. FATHER: John Schaefer

18. DEATH CAUSED BY: (a) Acute myocardial infarction
19. MINS.
20. PLACE OF INJURY: Mount Prospect, IL 60056
21. HOW INJURY OCCURRED: [Redacted]22. NATURE OF INJURY: [Redacted]23. AUTOPSY: No

24. SIGNATURE: Robert H. Babcox, Deputy Coroner
25. SIGNATURE: [Redacted]
26. SIGNATURE: [Redacted]

27. BURIAL: All Saints Cemetery, Libertyville, IL
28. FUNERAL HOME: Friedrich's Funeral Home, 320 West Central Avenue, Mount Prospect, IL 60056
29. LOCAL REGISTRAR SIGNATURE: Allen H. Schertz, Registrar
30. DATE: September 28, 1982
31. PLACE: Libertyville, Illinois

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named at item 1, and that this record was established and filed in my office in accordance with the provisions of the Illinois Vital Records Act.
DATE: September 28, 1982
SIGNED: Allen H. Schertz
AT: Libertyville, Illinois
OFFICIAL TITLE: Registrar

The original record of this death is permanently filed with the ILLINOIS DEPARTMENT OF PUBLIC HEALTH at Springfield. County clerks and local registrars are authorized to make certifications from copies of the original record. The Illinois statutes provide that the certification of a death record by the Department of Public Health, local registrar or county clerk shall be prima facie evidence in all courts and places of the facts therein stated.
VR-201B (1968)
OFFICE OF VITAL RECORDS - ILLINOIS DEPARTMENT OF PUBLIC HEALTH - SPRINGFIELD 62761