

# UNOFFICIAL COPY



Doc#: 1405149001 Fee: \$42.00  
RHSP Fee: \$9.00 RPRF Fee: \$1.00  
Karen A. Yarbrough  
Cook County Recorder of Deeds  
Date: 02/20/2014 09:17 AM Pg: 1 of 3

**DECEASED  
JOINT TENANCY  
AFFIDAVIT**

**MAIL TO:**

**JOHN C. HAAS  
115 S. EMERSON ST.  
MT. PROSPECT, IL 60056**

STATE OF ILLINOIS        )  
  ) SS.  
COUNTY OF COOK        )

**VOULA S. TRAKAS**, being duly sworn states that she resides at 907 W. Kenilworth Avenue, Palatine, Illinois 60067.

That she was acquainted with **SAM S. TRAKAS**, also known as **SAM TRAKAS**, deceased, who at the time of his death, was one of the owners of the land in Cook County, Illinois, legally described as:

SEE LEGAL DESCRIPTION ON REVERSE SIDE HEREOF

Property Address:   **828 S. Hicks Road, Palatine, Illinois 60067**

Permanent Index Numbers:   **02-26-103-012 and 02-26-103-013**

That the deceased died January 3, 2012, as evidenced by a copy of death certificate of the deceased attached hereto.

That the deceased died leaving a <sup>no</sup> Last Will and Testament. ~~The Will was filed in the Unproven Will Box of the Probate Division of the Clerk of Circuit Court of Cook County, Illinois, on~~

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, did not exceed the allowable exemptions available to the deceased's estate for Federal or Illinois Estate Tax purposes.

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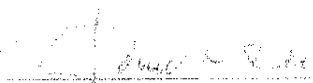
That all debts of the deceased are paid in full and there is no Federal or Illinois Estate Tax due, or they have been paid in full.

Affiant makes this affidavit for the purposes of inducing any title company to issue its title policy, describing the above-mentioned property.

IN WITNESS WHEREOF, the Affiant has affixed her signature hereto this 10th day of May, 2013.

  
VOULA S. TRAKAS, Affiant

Subscribed and sworn to before me  
this 10th day of May, 2013.

  
Notary Public

### LEGAL DESCRIPTION

**The North 150 feet of the East 1/2 of Lot 1 in Block 9 in A. T. McIntosh and Company's Palatine Estates Unit Number 2 in the North 1/2 of the Northwest 1/4 of Section 26, Township 42 North, Range 10 East of the Third Principal Meridian, in Cook County, Illinois except that part described as follows:**

**Commencing at the Northeast corner of Lot 1 in Block 9 in A. T. McIntosh and Company's Palatine Estates Unit Number 2; thence West along the North line of said Lot 1, a distance of 26.65 feet, to the West line of Public Highway dedicated by plat recorded February 16, 1933 as Document 11200341 for the point of beginning; thence South along said West line of Public Highway 9.0 feet; thence Northwest on a straight line 14.2 feet, to a point on the North line of Lot 1 aforesaid 11.0 feet West of the point of beginning; thence East along said North line 11.0 feet, to the point of beginning, all in Cook County, Illinois. ALSO**

**The East 1/2 of Lot 1 (except the North 150 feet as measured on the East line thereof) in Block 9 in A. T. McIntosh and Company's Palatine Estates Unit Number 2 in the North 1/2 of the Northwest 1/4 of Section 26, Township 42 North, Range 10 East of the Third Principal Meridian, in Cook County, Illinois.**

Property Address: 828 S. Hicks Road, Palatine, Illinois 60067

Permanent Index Numbers: 02-26-103-012 and 02-26-103-013

This instrument prepared by John C. Haas, Attorney at Law, 115 S. Emerson Street, Mount Prospect, Illinois 60056

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**VILLAGE OF LIBERTYVILLE  
LIBERTYVILLE, ILLINOIS  
MEDICAL CERTIFICATE OF DEATH**

STATE FILE NUMBER 2012 0000911

DATE ISSUED 01/09/2012

DECEDENT'S LEGAL NAME SAM TRAKAS		SEX MALE	DATE OF DEATH JANUARY 03, 2012	
COUNTY OF DEATH LAKE	AGE AT LAST BIRTHDAY 74 YEARS	DATE OF BIRTH JULY 16, 1937		
CITY OR TOWN BARRINGTON		HOSPITAL OR OTHER INSTITUTION NAME PEPPER FAMILY HOSPICE HOME AND CARE CENTER		
PLACE OF DEATH HOSPICE FACILITY				
BIRTHPLACE GREECE	SOCIAL SECURITY NUMBER [REDACTED]	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME VOULA BISKOS	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 907 W KENILWORTH	APT NO	CITY OR TOWN PALATINE		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60067	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION SARANTOS TRAKAS	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION PANAGIOTA VELONIS
INFORMANT'S NAME VOULA TRAKAS		RELATIONSHIP WIFE	MAILING ADDRESS 907 W KENILWORTH, PALATINE, IL, 60067	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION SAINT MICHAEL THE ARCHANGEL CEMETERY	LOCATION - CITY OR TOWN AND STATE PALATINE, IL	DATE OF DISPOSITION JANUARY 07, 2012	
FUNERAL HOME JOHN G ADINAMIS FUNERAL DIRECTOR LTD, 185 E. NORTHWEST HWY, PALATINE, IL, 60067				
FUNERAL DIRECTOR'S NAME CHARLES D VERGAN			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034010624	
LOCAL REGISTRAR'S NAME KEVIN J BOWENS			DATE FILED WITH LOCAL REGISTRAR JANUARY 9, 2012	
<b>CAUSE OF DEATH</b> PART I: ENDSTAGE BLADDER CANCER				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.	2 YEARS	
		b.	Due to (or as a consequence of)	
		c.	Due to (or as a consequence of)	
			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 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? NO	DATE LAST SEEN ALIVE UNKNOWN	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 11:00 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED JANUARY 04, 2012	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH TRACY HASHEMI, 405 LAKE ZURICH RD, BARRINGTON, ILLINOIS, 60010				PHYSICIAN'S LICENSE NUMBER 036095011

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.

*Kevin J. Bowens*

Kevin J. Bowens

Village Of Libertyville, Local Registrar



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE