

UNOFFICIAL COPY

AFFIDAVIT REGARDING DECEASED JOINT TENANCY

STATE OF ILLINOIS)
) SS
COUNTY OF COOK)



Doc#: 1406416013 Fee: \$42.00
RHSP Fee:\$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 03/05/2014 11:52 AM Pg: 1 of 3

Jane Heron being first duly sworn, for the purpose of clearing title covering the property described below, deposes and says:

1. That she resides at 2525 N. Sawyer Avenue, Chicago, IL 60647.
2. That she was acquainted with and married to Kenneth Tetzlaff, who died on November 8, 2011, as evidenced by the attached certified copy of the death certificate.
3. That the decedent was one of the owners of the property known as:

LOT 37 AND THE SOUTH 1/2 OF LOT 38 IN BLOCK 6 IN THE SUBDIVISION OF 39 ACRES ON THE EAST SIDE OF THE EAST 1/2 OF THE SOUTH EAST 1/4 OF SECTION 26, TOWNSHIP 40 NORTH RANGE 13, EAST OF THE THIRD PRINCIPLE MERIDIAN, IN COOK COUNTY, ILLINOIS.

Permanent Real Estate Index Number: 13-26-422-010-0000

Address of Real Estate: 2525 N. Sawyer Ave
Chicago, IL 60647

4. That said decedent died leaving a last will and testament.
5. That the total value of said decedent's estate for State of Illinois Inheritance Tax/Estate Tax and Federal Estate Tax purposes does not exceed the exclusion limits.

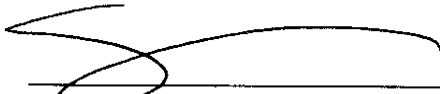
Jane Heron
Jane Heron

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Subscribed and sworn to
before me this 2nd day of January, 2014.





Notary Public

Prepared By:
Generation Law, Ltd.
747 N. Church Rd., Suite B4B
Elmhurst, IL 60126
(630) 782-1766

Mail To:
Generation Law, Ltd.
747 N. Church Rd., Suite B4B
Elmhurst, IL 60126
(630) 782-1766

Send Tax Bills To:
Jane Heron
2525 N. Sawyer Ave.
Chicago, IL 60647

Property of Cook County Clerk's Office

NON-OFFICIAL COPY

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

STATE FILE NUMBER 2011 0083994

DATE ISSUED 12/30/2013

DECEDENT'S LEGAL NAME KENNETH WALTER TETZLAFF		SEX MALE	DATE OF DEATH NOVEMBER 08, 2011	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 74 YEARS	DATE OF BIRTH JUNE 30, 1937		
CITY OR TOWN PARK RIDGE		HOSPITAL OR OTHER INSTITUTION NAME RAINBOW HOSPICE ARK		
PLACE OF DEATH HOSPICE FACILITY				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED]-2762	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME JANE HERON	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 2525 N SAWYER AVE	APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60647	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION WALTER TETZLAFF	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION LETZEN
INFORMANT'S NAME JANE HERON		RELATIONSHIP WIFE	MAILING ADDRESS 2525 N SAWYER AVE, CHICAGO, IL, 60647	
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION MONTROSE CEMETERY CO.	LOCATION - CITY OR TOWN AND STATE CHICAGO, IL	DATE OF DISPOSITION NOVEMBER 10, 2011
FUNERAL HOME CHRISTIAN FUNERAL HOME, 3100 WEST IRVING PARK ROAD, CHICAGO, IL, 60618				
FUNERAL DIRECTOR'S NAME MATHIEU PATRICK BALE			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016440	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR NOVEMBER 14, 2011	
CAUSE OF DEATH PART I. RENAL CELL CANCER				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.	APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	UNKNOWN
		b.		
		c.		
		Due to (or as a consequence of):		
		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? NO	DATE PRONOUNCED	TIME OF DEATH 03:45 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED NOVEMBER 09, 2011	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH TERRY CLARBOUR, 1601 NORTH WESTERN AVENUE, PARK RIDGE, ILLINOIS, 60068			PHYSICIAN'S LICENSE NUMBER 036099064	

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 EMBOSSED STATE AND COUNTY SEALS AT BOTTOM