

UNOFFICIAL COPY

**SURVIVING
JOINT TENANCY
AFFIDAVIT**



Doc#: 1509713040 Fee: \$40.00
RHSP Fee: \$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 04/07/2015 09:43 AM Pg: 1 of 2

AFTER RECORDING MAIL TO:
Edmund J. Wohlmuth
Attorney at Law
115 S. Emerson St.
Mt. Prospect, IL 60056.

STATE OF ILLINOIS)
COUNTY OF COOK)

DONNA L. LEMKE being duly sworn states that she resides at 134 BERNARD DRIVE, BUFFALO GROVE, IL.

That she is the surviving spouse of DAVID LEMKE who at the time of his death, was one of the owners of the land in Cook County, Illinois, described as

Lt 243 in Buffalo Grove Unit No 3, bng a Sub in the NW $\frac{1}{4}$ of Sec 4, T 42 N, R 11, E of the 3rd P.M., atptr 10-31-1978 as Doc 17364385, Bk 523, page 13, in CCI.

PIN# 03-04-110-024-0000
Commonly Known As: 134 BERNARD DRIVE, BUFFALO GROVE, IL.

That the deceased died 2/6/14, as evidenced by a certified copy of death certificate of the deceased attached hereto.

That the deceased died leaving a Last Will and Testament. The will was deposited in the unproven will files of the Clerk of the Circuit Court of Cook County, Illinois.

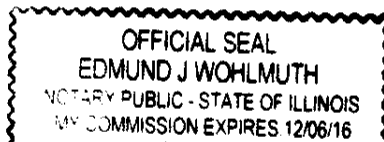
That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of \$1,000,000.00 Dollars.

Affiant makes this affidavit for the purpose of inducing any Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

DONNA L. LEMKE, affiant

Subscribed and sworn to before me
FEBRUARY 27, 2015.

Notary Public



CCRD REVIEWER

DOCUMENT PREPARED BY: Edmund J. Wohlmuth, Attorney at Law,
115 S. Emerson St., Mt. Prospect, IL 60056

UNOFFICIAL COPY

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

STATE FILE NUMBER 2014 0010889

DATE ISSUED 2/11/2014

DECEDENT'S LEGAL NAME DAVID ERWIN LEMKE			SEX MALE	DATE OF DEATH FEBRUARY 06, 2014
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 71 YEARS	DATE OF BIRTH NOVEMBER 21, 1942		
CITY OR TOWN BUFFALO GROVE	HOSPITAL OR OTHER INSTITUTION NAME 134 BERNARD DRIVE			
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE PALATINE, IL	SOCIAL SECURITY NUMBER ?	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME DONNA MILLER	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 134 BERNARD DRIVE	APT. NO.	CITY OR TOWN BUFFALO GROVE	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60089	FATHER/CO-PARENTS NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MARTIN LEMKE	MOTHER/CO-PARENTS NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION LORETTA GEFTE
INFORMANT'S NAME DONNA LEMKE	RELATIONSHIP WIFE	MAILING ADDRESS 134 BERNARD DRIVE, BUFFALO GROVE, IL, 60089		
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION MEMORY GARDENS CEMETERY	LOCATION - CITY OR TOWN AND STATE ARLINGTON HEIGHTS, IL	DATE OF DISPOSITION FEBRUARY 12, 2014	
FUNERAL HOME KOLSSAK FUNERAL HOME, 189 SOUTH MILWAUKEE AVENUE, WHEELING, IL, 60090				
FUNERAL DIRECTOR'S NAME JONATHAN A KOLSSAK			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015553	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR FEBRUARY 11, 2014	
CAUSE OF DEATH	PART I	BRAIN CANCER	APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	MONTHS
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 significant conditions contributing to death 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? YES	DATE LAST SEEN ALIVE OCTOBER 04, 2013	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 10:10 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED FEBRUARY 10, 2014	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH ROBERT KAPICKA, 1538 NORTH ARLINGTON HEIGHTS ROAD, ARLINGTON HEIGHTS, ILLINOIS, 60004			PHYSICIAN'S LICENSE NUMBER 036 069747	

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