

UNOFFICIAL COPY

JOINT TENANCY AFFIDAVIT

William W. Berglund, hereinafter referred to as the affiant, states under oath that the affiant has personal knowledge of the facts set forth herein and resides at 2913 Jackson Drive in the City of Arlington Heights, IL; that the affiant was acquainted with Ragnhild Berglund, the decedent who resided at 2913 Jackson Drive in the City of Arlington Heights, IL; that at the time of death, the decedent was one of the owners of the property commonly known as 2913 Jackson Drive in the City of Arlington Heights, IL 60004, by virtue of properly recorded joint tenancy warranty deed, said property located in Cook County, Illinois, and legally described as follows:

SEE ATTACHED

Permanent Index Number: 03-09-401-026-0000

That 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;

That the decedent died on January 14, 2014, leaving a last will and testament;

That the total value of decedent's estate, including the taxable interest in the above property was \$350,000.00; and

That the value of the above property individually was \$350,000.00.

That the affiant makes this affidavit to induce RECORDER OF DEEDS OF COOK COUNTY and PROFESSIONAL NATIONAL TITLE NETWORK, INC. (PNTN), to issue its policy of title insurance on the above described property, with the knowledge that the statements made herein will be relied upon for that purpose.

The affiant hereby covenants and agrees, for himself/herself/themselves, his/her/their heirs, personal representatives or assignees, to forever fully indemnify, protect, defend and hold RECORDER OF DEEDS OF COOK COUNTY and PNTN harmless and to reimburse Commonwealth Land Title Insurance Company and PNTN for all loss, costs, damages, suits, attorney's fees and expenses of every kind and nature which Commonwealth Land Title Insurance Company or PNTN may suffer, expend or incur by reason of the issuance of said policy free and clear of the following exceptions:

1. Claims against the estate of Ragnhild Berglund, the decedent;
2. Illinois State Inheritance Tax and Federal Tax which may be charged against the estate of said decedent;
3. Legacies, if any, created by the will of said decedent;
4. Rights to contribution.

William W. Berglund (Seal)
WILLIAM W. BERGLUND

Subscribed and Sworn to before me this 20th day of April, 2015

(Seal)

April 20th, 2015

Gene A Eich
Notary Public
OFFICIAL SEAL
STATE OF ILLINOIS
GENE EICH
MY COMMISSION EXPIRES
JUNE 26, 2015

Note: If the decedent left a will, it will be necessary that the original or a certified copy thereof be presented to us for inspection. A death certificate, together with evidence of payment of death taxes, if any, should accompany this affidavit.

This instrument was prepared by:

Gene A Eich
6032 North Lincoln Avenue
Morton Grove, IL 60053

Mail to:

Gene A Eich
6032 North Lincoln Avenue
Morton Grove, IL 60053



Doc#: 1511250003 Fee: \$42.00
RHSP Fee: \$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 04/22/2015 10:21 AM Pg: 1 of 3

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PROPERTY ADDRESS: 2913 Jackson Drive, Arlington Heights, IL 60004

LEGAL DESCRIPTION:

THE SOUTH 100 FEET OF THE NORTH 1433 FEET OF THE WEST 435.6 FEET OF THE EAST 871.2 FEET OF THE EAST ¼ OF THE SOUTH EAST ¼ OF SECTION 9, TOWNSHIP 42 NORTH, RANGE 11, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

SUBJECT TO TAXES FOR 1970 AND SEBSEQUENT YEARS AND ANNUAL BENEFITS FOR THE MAINTENANCE AND REPAIR OF WHEELING DRAINAGE DISTRICT NO. 1 UNDER LAW DOCKET NO 26637 COUNTY COURT AND ALL OTHER COVENANTS AND RESTRICTIONS OF RECORD.

PERMANENT INDEX NUMBER(S): 03-09-401-026-0000

Property of Cook County Clerk's Office

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

DATE ISSUED 1/18/2014

STATE FILE NUMBER 2014 0092506

DECEDENT'S LEGAL NAME RAGNHILD J BERGLUND		SEX FEMALE	DATE OF DEATH JANUARY 12, 2014	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 75 YEARS	DATE OF BIRTH MAY 24, 1938		
CITY OR TOWN ARLINGTON HEIGHTS		HOSPITAL OR OTHER INSTITUTION NAME 2913 NORTH JACKSON DRIVE		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED] 2639	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME WILLIAM W BERGLUND	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 2913 NORTH JACKSON DRIVE		APT. NO.	CITY OR TOWN ARLINGTON HEIGHTS	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60004	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION REINHART HOVE	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JOHANNA NOT AVAILABLE
INFORMANT'S NAME WILLIAM W BERGLUND		RELATIONSHIP HUSBAND	MAILING ADDRESS 2913 NORTH JACKSON DRIVE, ARLINGTON HEIGHTS, IL, 60004	
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION WOODLAWN CEMETERY	LOCATION - CITY OR TOWN AND STATE FOREST PARK, IL	DATE OF DISPOSITION JANUARY 16, 2014
FUNERAL HOME LAUTERBURG & OEHLER FUNERAL HOME, 2000 EAST NORTHWEST HIGHWAY, ARLINGTON HEIGHTS, IL, 60004				
FUNERAL DIRECTOR'S NAME MICHAEL P. MURRAY			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034012096	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR JANUARY 14, 2014	
CAUSE OF DEATH	PART I	METASTATIC LUNG CANCER		19 MONTHS
IMMEDIATE CAUSE <small>(Final disease or condition resulting in death)</small>	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 DECEMBER 27, 2013	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 03:20 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED JANUARY 13, 2014	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH RAJAT MALHOTRA, 880 WEST CENTRAL ROAD, SUITE 8200, ARLINGTON HEIGHTS, ILLINOIS, 60005			PHYSICIAN'S LICENSE NUMBER 036095434	

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM



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