



Doc#: 1519141027 Fee: \$44.00  
RHSP Fee: \$9.00 RPRF Fee: \$1.00  
Karen A. Yarbrough  
Cook County Recorder of Deeds  
Date: 07/10/2015 12:12 PM Pg: 1 of 4



ATTORNEYS'  
TITLE  
GUARANTY  
FUND,  
INC.

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1/3

JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS

COUNTY OF COOK

SS

FRIEDA WALCH, hereby referred to as the affiant, states under oath that the affiant resides at \_\_\_\_\_, in the City of \_\_\_\_\_, State of Illinois; that the affiant was acquainted with Frank Walch, the decedent; at the time of death, the decedent was one of the owners of property, by virtue of a properly recorded joint tenancy deed, said property located in Cook County, State of Illinois, and legally described as follows:

Lots 19 and 20 (except the Northeasterly 10 feet thereof) in Elmore's Forest View, being a Subdivision of Block 16 and part of Block 9 in Hamilton's Subdivision of Lot 1 of Caldwell's Reservation, in Township 40 North Range 13, East of the Third Principal Meridian, in Cook County, Illinois.

5812 N. KINGSDALE AVE  
CHICAGO IL 60646  
13-03-318-647-0000

Attorneys' Title Guaranty Fund, Inc.  
1111 North Dearborn Street, Suite 2400  
Chicago, IL 60610-4650  
Attain Search Department

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 decedent died on 7/11/14, leaving ~~no~~ a last will and testament;

The total value of decedent's estate, including the taxable interest in the above property was \$ 515,000.00, and the value of the above property individually was \$ \$515,000.00 actual only.

The State and 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.

Y  
S  
P  
N  
Y

# UNOFFICIAL COPY

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, free and clear of the following objections:

1. Claims against the estate of Frank Walch, 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.

X Frank Walch (Seal)  
 \_\_\_\_\_ (Seal)

Subscribed and sworn to before me this

11th day of June, 2015  
 Day Month Year

Cindy Cannizzaro  
 Notary Public



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

This instrument prepared by:

Att. Cindy Cannizzaro  
 Name  
5357 W. Devon Ave  
 Address  
Chicago IL 60646  
 City, State, Zip

Return to:

Att. Cindy Cannizzaro  
 Name  
5357 W. Devon Ave  
 Address  
Chicago IL 60646  
 City, State, Zip

# UNOFFICIAL COPY

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Property of Cook County Clerk's Office

## UNOFFICIAL COPY

## CERTIFICATION OF DEATH RECORD

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

STATE FILE NUMBER 2014 0054351

DATE ISSUED 7/18/2014

DECEDENT'S LEGAL NAME FRANZ WALCH		SEX MALE	DATE OF DEATH JULY 11, 2014	
COUNTRY OF DEATH COOK	AGE AT LAST BIRTHDAY 82 YEARS	DATE OF BIRTH JULY 06, 1932		
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME 5812 N KINGSDALE		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE YUGOSLAVIA	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MIDDLE NAME FRIEDA MAHLER	EVER IN U.S. ARMED FORCES? YES
RESIDENCE 5812 N KINGSDALE	APT. NO.	CITY OR TOWN CHICAGO		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	FATHER'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION FRANZ WALCH	MOTHER'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION BARBARA KURNIG	
INFORMANT'S NAME FRIEDA WALCH	RELATIONSHIP WIFE	MAILING ADDRESS 5812 N KINGSDALE CHICAGO, IL 60648		
METHOD OF DISPOSITION CREMATION	PLACE OF DISPOSITION HEIGHTS CREMATORY	LOCATION - CITY OR TOWN AND STATE CHICAGO HEIGHTS, IL	DATE OF DISPOSITION JULY 17, 2014	
FUNERAL HOME ELEMENTS CREMATION LLC, 8895 S ARCHER, WILLOW SPRINGS, IL, 60460				
FUNERAL DIRECTOR'S NAME DANIEL JOSEPH MCCARTHY		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015286		
LOCAL REGISTRAR'S NAME DAVID ORR		DATE FILED WITH LOCAL REGISTRAR JULY 18, 2014		
CAUSE OF DEATH	PART I	COLON CANCER		YEARS
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a.	Due to (or as a consequence of)		
	b.	LIVER CANCER		YEARS
	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				
FEMALE PREGNANCY STATUS NOT APPLICABLE		WAS AN AUTOPSY PERFORMED? NO		
		WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A		
		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 02:39 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED JULY 17, 2014	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH ROBERT MARION, 217 EXECUTIVE DRIVE, ADDISON, ILLINOIS, 60101			PHYSICIAN'S LICENSE NUMBER 036-091110	

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