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1526701079

Doc#: 1526701079 Fee: \$42.00
RHSP Fee: \$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 09/24/2015 02:36 PM Pg: 1 of 3

ATTORNEYS' TITLE GUARANTY FUND, INC.

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1/3

JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS

COUNTY OF COOK

Janice R. Ickes hereby referred to as the affiant, states under oath that the affiant resides at 3514 S. California Ave, in the City of Chicago State Illinois; that the affiant was acquainted with Richard George Ickes, 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:

LOT 7 IN BLOCK 1 IN GROSS AND MOORE'S SUBDIVISION IN THE EAST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 36, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

3514 S. CALIFORNIA AVE
CHICAGO, IL 60632

16-36-304-026-0000

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 October 18, 2013, leaving no/a last will and testament;

The total value of decedent's estate, including the taxable interest in the above property was \$ 52,000.00, and the value of the above property individually was \$ _____;

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.

S Y
P 3
S N
SC Y
INT Y

Attorneys' Title Guaranty Fund, Inc.
1 S. Wacker Rd., STE 2400
Chicago, IL 60606-4650
Attn: Search Department

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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 Richard George Ickes, 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.

Jamie R. Ickes

(Seal)

(Seal)

Subscribed and sworn to before me this

11 day of Sept, 2015
Day Month Year

[Signature]
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:

Patrick J. Garrity
Name

10142 S. Washtenaw
Address

Chicago, IL 60655
City, State, Zip

Return to:

Patrick J. Garrity
Name

10142 S. Washtenaw
Address

Chicago, IL 60655
City, State, Zip

UNOFFICIAL COPY**HILLSIDE, ILLINOIS
MEDICAL CERTIFICATE OF DEATH**

STATE FILE NUMBER 2013 0078799

DATE ISSUED 10/21/2013

DECEDENT'S LEGAL NAME RICHARD GEORGE ICKES			SEX MALE	DATE OF DEATH OCTOBER 18, 2013	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 74 YEARS		DATE OF BIRTH SEPTEMBER 03, 1939	
CITY OR TOWN PROVISO TWP			HOSPITAL OR OTHER INSTITUTION NAME HINES VETERAN ADMINISTRATION FACILITY		
PLACE OF DEATH INPATIENT					
BIRTHPLACE AURORA, IL		SOCIAL SECURITY NUMBER		STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME JANICE SMITH
RESIDENCE 3514 S CALIFORNIA		APT. NO.	CITY OR TOWN CHICAGO		EVER IN U.S. ARMED FORCES? YES
COUNTY COOK		STATE IL	ZIP CODE 60632	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION GEORGE ICKES	
INFORMANT'S NAME JANICE ICKES		RELATIONSHIP WIFE		MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MARIE MEEHAN	
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION ABRAHAM LINCOLN NATIONAL CEMETERY		LOCATION - CITY OR TOWN AND STATE ELWOOD, IL	DATE OF DISPOSITION OCTOBER 22, 2013
FUNERAL HOME JOHN J. MINICH FUNERAL DIRECTOR, 10132 S. ST. LOUIS, CHICAGO, IL, 60655					
FUNERAL DIRECTOR'S NAME JOHN J. MINICH				FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011151	
LOCAL REGISTRAR'S NAME ANTHONY WILLIAMS				DATE FILED WITH LOCAL REGISTRAR OCTOBER 21, 2013	
CAUSE OF DEATH PART I. ACUTE RESPIRATORY DISTRESS SYNDROME					
IMMEDIATE CAUSE (Final disease or condition resulting in death)					
a. _____ Due to (or as a consequence of):					
b. ANOXIC BRAIN INJURY (NON-TRAUMATIC) _____					
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 18, 2013		WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED
CERTIFIER PHYSICIAN				DATE CERTIFIED OCTOBER 18, 2013	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR SHAHAM S MUMTAZ, 5000 S 5TH AVENUE, HINES, ILLINOIS, 60141				PHYSICIAN'S LICENSE NUMBER 125063006	

60221

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.

OCT 21 2013

Anthony Williams
TOWNSHIP CLERK/REGISTRAR