

# UNOFFICIAL COPY

## JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS )  
 ) SS  
COUNTY OF COOK )

IGOR RABIN,

hereby referred to as the affiant, states under oath that the affiant resides at \_\_\_\_\_  
208 Fairmont

In the City of Mt. Prospect,  
State of Illinois;

that the affiant was acquainted with \_\_\_\_\_  
RAISA RABINOVICH,

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:

SEE ATTACHED EXHIBIT A

PIN: 10-28-111-044-1012



Doc#: 1527334045 Fee: \$46.00  
RHSP Fee: \$9.00 RPPF Fee: \$1.00  
Karen A. Yarbrough  
Cook County Recorder of Deeds  
Date: 09/30/2015 10:03 AM Pg: 1 of 5

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 February 3, 2015, leaving no/a last will and testament;

The total value of decedent's estate, including the taxable interest in the above property was \$ 200,000.00, and that the value of the above property individually was \$ 100,000.00.

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.

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## JOINT TENANCY AFFIDAVIT (continued)

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 RAISA RABINOVICH, 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.

*Raisa Rabinovich* (Seal)  
 \_\_\_\_\_ (Seal)

Subscribed and sworn to before me this

30<sup>th</sup> day of June, 2015  
(Month) (Year)  
*Maureen Loughran*  
(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:

James C. Siebert  
(Name)  
3325 N. Arlington Heights Rd., Suite 500  
(Address)  
Arlington Heights, IL 60004  
(City, State, Zip)

Return to:

James C. Siebert  
(Name)  
3325 N. Arlington Heights Rd., Suite 500  
(Address)  
Arlington Heights, IL 60004  
(City, State, Zip)

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## EXHIBIT A

PARCEL 1: UNIT 205 IN THE SUBURBANITE CONDOMINIUM AS DELINEATED ON A SURVEY OF THE FOLLOWING PARCEL OF REAL ESTATE (HEREIN REFERRED TO AS PARCEL): LOTS 29 THROUGH 35 INCLUSIVE (EXCEPT THE SOUTH 8 FEET THEREOF) IN GALITZ SUBDIVISION OF LOTS 27 THROUGH 29 INCLUSIVE OF GALITZ SUBDIVISION OF THAT PART OF LOT 10 LYING WEST OF THE NORTH AND SOUTH QUARTER SECTION LINE OF COUNTY CLERK'S DIVISION OF PART OF SECTION 28, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, TOGETHER WITH A STRIP OF LAND 18.8 FEET IN WIDTH LYING SOUTH OF AND ADJACENT TO SAID LOT 10, ACCORDING TO THE MAP RECORDED SEPTEMBER 30, 1893 AS DOCUMENT 1935860 IN BOOK 58 OF PLATS, PAGE 53, WHICH SURVEY IS ATTACHED AS EXHIBIT A TO THE DECLARATION OF CONDOMINIUM OWNERSHIP RECORDED AS DOCUMENT 20409603, TOGETHER WITH AN UNDIVIDED 1.95 PERCENT INTEREST IN SAID PARCEL (EXCEPTING FROM SAID PARCEL ALL THE PROPERTY AND SPACE COMPRISING ALL THE UNITS THEREOF AS DEFINED AND SET FORTH IN SAID DECLARATION AND SURVEY) IN COOK COUNTY, ILLINOIS.

PARCEL 2: A PERPETUAL EASEMENT CONSISTING OF THE RIGHT TO USE FOR PARKING PURPOSES PARKING SPACE NO. 5 AS DELINEATED ON THE SURVEY ATTACHED TO THE DECLARATION AFORESAID.

Permanent Index No. 10-28-111-044-1012

Property Address: 5251 W. Galitz, Unit 205, Skokie, IL 60077

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

STATE FILE NUMBER 2015 0009845

DATE ISSUED 2/6/2015

DECEDENT'S LEGAL NAME RAISA RABINOVICH			SEX FEMALE	DATE OF DEATH FEBRUARY 03, 2015	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 83 YEARS		DATE OF BIRTH OCTOBER 14, 1931	
CITY OR TOWN NORTHBROOK			HOSPITAL OR OTHER INSTITUTION NAME MANORCARE OF NORTHBROOK		
PLACE OF DEATH NURSING HOME / LONG TERM CARE FACILITY					
BIRTHPLACE UKRAINE		SOCIAL SECURITY NUMBER 330-70-5027	STATUS AT TIME OF DEATH WIDOWED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 5251 GALITZ AVENUE			APT. NO. 205	CITY OR TOWN SKOKIE	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60077	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ABRAM SHIHMAN		MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION FAIGE PALATNIK
INFORMANT'S NAME IGOR RABIN		RELATIONSHIP SON		MAILING ADDRESS 208 FAIRMONT PLACE, MT PROSPECT, IL, 60056	
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION RUDGELAWN CEMETERY		LOCATION - CITY OR TOWN AND STATE CHICAGO, IL	DATE OF DISPOSITION FEBRUARY 05, 2015
FUNERAL HOME CHICAGO JEWISH FUNERALS, 8851 NORTH SKOKIE BOULEVARD, SKOKIE, IL, 60077					
FUNERAL DIRECTOR'S NAME SUSAN WINKELSTEIN				FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011533	
LOCAL REGISTRAR'S NAME DAVID ORR				DATE FILED WITH LOCAL REGISTRAR FEBRUARY 4, 2015	
<b>CAUSE OF DEATH</b> PART I. COLON CANCER					
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a. _____ Due to (or as a consequence of):			UNKNOWN UNKNOWN
		b. _____ Due to (or as a consequence of):			
		c. _____ Due to (or as a consequence of):			
PART II. Enter other <b>significant conditions contributing to death</b> 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 FEBRUARY 02, 2015		WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 03:22 AM
CERTIFIER PHYSICIAN				DATE CERTIFIED FEBRUARY 03, 2015	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH JORDAN GRUMET, 666 DUNDEE ROAD, NORTHBROOK, ILLINOIS, 60062				PHYSICIAN'S LICENSE NUMBER 036106218	

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

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- Identifying invisible UV fibers embedded in the paper.
- Applying fresh liquid bleach to activate color stain chemical protection reaction.
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- This backer copy is constructed with a microtext border. Inspection under magnifier shows "STATEOFILLINOIS" in microtext.
- Document is protected with embossed Cook County seals.
- Photocopying this document produces the word "VOID" across the face.