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Doc#: 1617441086 Fee: \$44.00
RHSP Fee: \$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 06/22/2016 02:02 PM Pg: 1 of 4

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ATTORNEYS' TITLE GUARANTY FUND, INC.

Illinois Offices:
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JOINT TENANCY AFFIDAVIT

STATE OF IL

COUNTY OF LAKE

SS

KAREN M. VONTIN hereby referred to as the affiant, states under oath that the affiant resides at 3241 N Daniels Ct., Arlington Heights, IL, in the City of Arlington Hts, State of IL; that the affiant was acquainted with PAUL R VONTIN, 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 IL, and legally described as follows:

1/2 3241 N. DANIELS CT.
ARLINGTON HTS, IL 60004
03-08-213-033-1047

Attorneys' Title Guaranty Fund, Inc.
1 S. Wacker Dr., STE 2400
Chicago, IL 60606-4650
Attn: 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 11/28/2014, leaving no ~~last~~ last will and testament;

The total value of decedent's estate, including the taxable interest in the above property was \$ 400,000, and the value of the above property individually was \$ 400,000;

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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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 PAUL R VONTAN, 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.

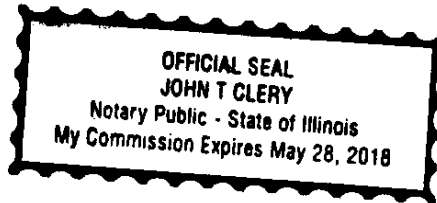
Loren M. Vontan (Seal)

(Seal)

Subscribed and sworn to before me this

2nd day of April, 2016
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:

JOHN T. CLERY
Name
1515 E. WOODFIELD ROAD #830
Address
SCHAUMBURG, IL 60173
City, State, Zip

Return to:

JOHN T. CLERY
Name
1515 E. WOODFIELD ROAD #830
Address
SCHAUMBURG, IL 60173
City, State, Zip

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ATTORNEYS' TITLE GUARANTY FUND, INC.

LEGAL DESCRIPTION

Permanent Index Number:

Property ID: 03-08-213-033-1047

Property Address:

3241 N. DANIELS CT.
ARLINGTON HEIGHTS, IL 60004

Legal Description:

Unit 905 in Building 2 in Frenchman's Cove Townhome Condominium, as delineated on a Survey of part of Lots 42 and 45 in Frenchman's Cove Unit Number 2, being a Subdivision of part of the West 1/2 of the Northeast 1/4 of Section 8, Township 42 North, Range 11, East of the Third Principal Meridian, which Survey is attached as Exhibit "C" to the Declaration of Condominium Ownership made by LaSalle National Bank, a National Bank Association, as Trustee under Trust Agreement dated September 1, 1988 and known as Trust Number 113490 recorded in the Office of the Recorder of Deeds of Cook County, Illinois on October 25, 1989 as Document 89505617, as amended from time to time, together with its undivided percentage interest in the common elements, in Cook County, Illinois.

PROPERTY OF COOK COUNTY CLERK'S OFFICE

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CERTIFICATION OF DEATH RECORD

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

STATE FILE NUMBER 2014 0091881

DATE ISSUED 12/4/2014

DECEDENT'S LEGAL NAME PAUL R VONTIN		SEX MALE	DATE OF DEATH NOVEMBER 28, 2014	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 81 YEARS	DATE OF BIRTH APRIL 08, 1933		
CITY OR TOWN PALATINE		HOSPITAL OR OTHER INSTITUTION NAME APERION CARE PLUM GROVE		
PLACE OF DEATH NURSING HOME / LONG TERM CARE FACILITY				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED]	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME KAREN M MUELLER	EVER IN U.S. ARMED FORCES? YES
RESIDENCE 3241 N DANIELS COURT		APT. NO.	CITY OR TOWN ARLINGTON HEIGHTS	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION PAUL C VONTIN	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION EDITH G EHLERT	
INFORMANT'S NAME KAREN M VONTIN		RELATIONSHIP WIFE	MAILING ADDRESS 3241 N DANIELS COURT, ARLINGTON HEIGHTS, IL 60004	
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION EVERGREEN CEMETERY ASSOCIATION	LOCATION - CITY OR TOWN AND STATE BARRINGTON, IL	DATE OF DISPOSITION DECEMBER 03, 2014
FUNERAL HOME AHLGRIM FAMILY FUNERAL SERVICES, 201 NORTH NORTHWEST HIGHWAY, PALATINE, IL, 60067				
FUNERAL DIRECTOR'S NAME KARL H SCHARMAN			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034012256	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR DECEMBER 4, 2014	
Cause of Death PART I. CARCINOMA COLON <small>IMMEDIATE CAUSE (Final disease or condition resulting in death)</small> a. _____ Due to (or as a consequence of) _____ b. PARKINSONS DISEASE _____ Due to (or as a consequence of) _____ c. DEMENTIA _____ 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			IF TRANSPORTATION INJURY, SPECIFY	
DESCRIBE HOW INJURY OCCURRED:				
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE NOVEMBER 17, 2014	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 01:53 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED DECEMBER 03, 2014	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR. JEROME ZWIERZYCKI, 420 LAKE COOK ROAD SUITE 115, DEERFIELD, ILLINOIS, 60015			PHYSICIAN'S LICENSE NUMBER 038071997	

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

