



ATTORNEYS' TITLE GUARANTY FUND, INC.

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Doc#: 1618334075 Fee: \$42.00 RHSP Fee: \$9.00 RPRF Fee: \$1.00 Karen A. Yarbrough Cook County Recorder of Deeds Date: 07/01/2016 02:03 PM Pg: 1 of 3

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JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS) COUNTY OF COOK)

William Witkowsky, hereby referred to as the affiant, states under oath that the affiant resides at 5618 S. Parkside, Chicago, IL 60638; that the affiant was acquainted with Alice E. Witkowsky; at the time of the decedent's death, the decedent was one of the owners of a parcel of property by virtue of a properly recorded joint tenancy or tenancy by the entirety deed, said property located in COOK County, Illinois, and legally described as follows:

PARCEL 1: UNIT 11541-201 TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN CONDOMINIUMS OF EDELWEISS, AS DELINEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT NUMBER 88057454, AS AMENDED FROM TIME TO TIME, IN THE SOUTHEAST 1/4 OF SECTION 23, TOWNSHIP 37 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL 2: EASEMENTS FOR INGRESS AND EGRESS FOR THE BENEFIT OF PARCEL 1 AS SET FORTH AND DEFINED IN PLAT OF SUBDIVISION RECORDED AS DOCUMENT NUMBER 87535521, AND DOCUMENT NUMBER 88057454.

Permanent Index Number(s): 23-23-416-027-1051 Property Address: 11541 Autobahn Drive, East Unit 201, Palos Park, IL 60464

Attorneys' Title Guaranty Fund, Inc. 1 S. Wacker Dr., STE 2400 Chicago, IL 60606-4650 Attn: Search Department 3

The decedent died on November 4, 2014 leaving no last will and testament;

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 total value of decedent's estate, including the taxable interest in the above property, is \$ 925,000.00, and that the value of the above property individually is \$ 80,000.00

The State 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.

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:

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JOINT TENANCY AFFIDAVIT

(continued)

1. Claims against the estate of Alice E. Witkowsky, deceased, 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.

William Witkowsky

 William Witkowsky

Subscribed and sworn to before me this

8th day of June, 2016
 (Month) (Year)

James J. Kash

 (Notary Public)

My commission expires _____



Note: If the decedent left a will, a certified copy thereof must be presented to ATG for inspection, along with a certified copy of the death certificate and evidence of payment of death taxes, if any.

This instrument prepared by:
 James J. Kash
 6545 W. Archer Ave.
 Chicago, Illinois 60638

Return to:
 James J. Kash
 6545 W. Archer Ave.
 Chicago, Illinois 60638

Property of Cook County Clerk's Office

UNOFFICIAL COPY

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

STATE FILE NUMBER 2014 0084283

DATE ISSUED 11/7/2014

DECEDENT'S LEGAL NAME ALICE E WITKOWSKY				SEX FEMALE	DATE OF DEATH NOVEMBER 04, 2014
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 94 YEARS	DATE OF BIRTH JANUARY 02, 1920		
CITY OR TOWN PALOS HEIGHTS			HOSPITAL OR OTHER INSTITUTION NAME PALOS COMMUNITY HOSPITAL		
PLACE OF DEATH INPATIENT					
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED]	STATUS AT TIME OF DEATH WIDOWED		SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME EVER IN U.S. ARMED FORCES? NO	
RESIDENCE 11541 AUTOBAHN DR EAST			APT. NO. 201	CITY OR TOWN PALOS PARK	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60464	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION WALTER OLSZEWSKI		MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION LUCY WIERZBOWSKI
INFORMANT'S NAME WILLIAM W WITKOWSKY		RELATIONSHIP SON	MAILING ADDRESS 5618 SOUTH PARKSIDE, CHICAGO, IL, 60638		
METHOD OF DISPOSITION ENTOMBMENT		PLACE OF DISPOSITION RESURRECTION CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE JUSTICE, IL	DATE OF DISPOSITION NOVEMBER 10, 2014	
FUNERAL HOME PALOS GAIDAS FUNERAL HOME, 11028 SOUTH WEST HIGHWAY, PALOS HILLS, IL, 60465					
FUNERAL DIRECTOR'S NAME DAVID GAIDAS			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034012326		
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR NOVEMBER 7, 2014		
CAUSE OF DEATH PART I. RESPIRATORY FAILURE					
IMMEDIATE CAUSE <small>(Final disease or condition resulting in death)</small>		a. HEART FAILURE, ACUTE CORONARY SYNDROME <small>Due to (or as a consequence of)</small>		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH 24 HOURS 2 DAYS YEARS	
		b. PULMONARY FIBROSIS <small>Due to (or as a consequence of)</small>			
		c. PULMONARY FIBROSIS <small>Due to (or as a consequence of)</small>			
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 NOVEMBER 04, 2014	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 05:18 PM	
CERTIFIER PHYSICIAN				DATE CERTIFIED NOVEMBER 04, 2014	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH BEATRICE M CORREA, 12251 S 80TH AVE, PALOS HEIGHTS, ILLINOIS, 60463				PHYSICIAN'S LICENSE NUMBER 036123828	

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