UNOFFICIAL COPY

Prepared by and Mail to: Robert J. Hennessy	
11800 S. 75th Ave. Suite 101	
Palos Heights, IL 60463 Doc#: 1622316065 Fee: \$42. RHSP Fee:\$9.00 RPRF Fee: \$1.00 Karen A. Yarbrough Cook County Recorder of Deeds Date: 08/10/2016 03:25 PM Pg: 1 of 3	
STATE OF ILLINO'S) DECEASED JOINT TENANCY AFFIDAVIT SS. File Number:	
ROBERT STADLER File Number:	
being duly sworn states that ne	
Palos Heights, IIIimois resides at 7021 GOII in the City of	
That he was acquainted with PATRICIA M. STADLER deceased who, at the time of death, was one of the owners of the land in Cook County, L, described as:	
SEE ATTACHED LEGAL	
That the deceased died November 4, 2011 , as evidenced by a certified copy of death certificate of the deceased attached hereto.	
That the deceased died: Leaving no Last Will & Testament.	
Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven will should be filed with the Clerk of the Probate Division of the Circuit Court of Cook County, 1L.	
Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Fronce Division of the Circuit Court of Cook County, IL, about	
That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of \$1,000,000.00 dollars.	
Affiant makes this affidavit for the purpose of inducing Old Republic National Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.	
Subscribed and sworn to before me by the said	
ROBERT STADLER	
this 30 thay of June / AD 20 16	
Notary Public A.D. 20 16 (Affiant's Signature)	
ROBERT J HENNESSY Official Seal Notary Public - State of Illinois My Commission Evelope Cert Sea	

COOK COUNTY CLERK VITAL RECORDS CHICAGO, ILLINOIS

STATE FILE NUMBER	2011 008	13922	MEDI	JAL VERHILI	CATE OF DEA	! "	DATE ISSUED	4/9/2014
DECEDENT'S LEGAL NAM PATRICIA MARIE	3.7	ER				v 1. 1981 - 1981 1982 €	OF DEATH	- 111 111 111 1
COUNTY OF DEATH			AGE AT LAST BIR 75 YEARS	ITHDAY	DATE OF MAR			
CITY OR TOWN PALOS HEIGHTS					OR OTHER INSTITUTION	N NAME		
PLACE OF DEATH								
BIRTHPLACE CHICAGO, IL		SOCIAL SECURITY		S AT TIME OF DEATH RRIED		USE/CIVIL UNION PARTNER'S M. STADLER	HOEN NAME EVER IN U.S. FORCES?	
RESIDENCE 7821 WEST GOLF	Falve			APT NO.	CITY OR TOWN		INSIDE CITY LIN	
COOK	STAT.	ZIP CODE 30463	FATHER/CO PARENT		MARRIAGE/CIVIL UNION	MOTHER/CO-PARENTS NAME RHEA DIETMEYE	E PRIOR TO FIRST MARRIAGE/C	IVIE UNION
INFORMANT'S NAME JAMES STADLER			RELATIONSI SON	H IP	MAILING ADDI 8798 BUTT	ESS ERFIELD LANE, ORLAN	Ö PARK, IL, 60462	
METHOD OF DISPOSITION BURIAL	N.		OF DISPOSITION SEPULCHIE CAT	HOUC CEMETERY		ITY OR TOWN AND STATE	DATE OF DISPOSITION NOVEMBER 08, 20	
FUNERAL HOME JOHN SHEEHY AF	ND SON	S FUNERAL H	OM.= -0.0.W	127TH STREET.		II 60463		
PUNERAL DIRECTOR'S NA JOHN R SHEEHY							LLINOIS LICENSE NUMBER	- 100 m
LOCAL REGISTRAR'S NAM DAVID ORR	ИE					DATE FILED WITH LOCA NOVEMBER 4, 2		
CAUSE OF DEATH	PART I.	HYPOXIA						
(Final diglease or condition resulting in death)	b .	PNEUMONIA		Due to (or as a c. resequen	ce of)			
				Diue to (or as a consequen	ge of)			
	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	ASTHMA, COPD						
PART II. Enter other signiff	cant condi	tions contributing		Due to (or as a consequent		WAS AN AU	TOPSY PERFORMED? NO	
MYASTHENIA GRAV	/IS					WERE AUTO	PSY FINDINGS USED TO	
FEMALE PREGNANCY STA						MANNER OF	直 经基 起头 总数	
DATE OF INJURY		ग	ME OF INJURY	PLACE OF IN	WURY		INJURY AT V	VORK?
LOCATION OF INJURY		1						
DESCRIBE HOW INJURY O	XCCUARED					(FT)	HANSPC 4. TA TION INJURY, S	SPECIFY
ATTEND THE DECEASED?	J. Da	T I AOT DECH ALO	= 1					
YES		TE LAST SEEN ALN NOVEMBER 03		EDICAL EXAMINER OF ER CONTACTED?		PRONOUNCED	TIME OF DEAT 06:00 AM	
CERTIFIER PHYSICIAN						a Jugan 1880 V	E CERTIFIED: IOVEMBER 04, 2011	Violen (in
NAME, ADDRESS AND ZIP	CODE OF I	PERSON COMPLET	ING CAUSE OF DE	ATH			DEVENOR LICENSE LIVE	pro i iii



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.

JOAN MCELLIGOTT M.D., 7530 COLLEGE DRIVE, PALOS HEIGHTS, ILLINOIS; 60463





PHYSICIAN'S LICENSE NUMBER

036067099

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LEGAL DESCRIPTION

PARCEL 1:

UNIT NUMBER 7821-2B IN OAK HILLS CONDOMINIUM "1", AS DELINEATED ON SURVEY OF CERTAIN LOTS OR PARTS THEREOF IN BURNSIDE'S OAK HILL COUNTY CLUB VILLAGE SUBDIVISIONS, BEING SUBDIVISIONS OF THE SOUTHWEST QUARTER OF SECTION 36, TOWNSHIP 37 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN; WHICH SURVEY IS ATTACHED AS EXHIB! A" TO THE DECLARATION OF CONDOMINIUM MADE BY BURNSIDE CONSTRUCTION COMPANY, A CORPORATION OF ILLINOIS, AND RECORDED AS DOCUMENT NUMBER 23684699, AS AMENDED FROM TIME TO TIME, TOGETHER AVITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS, IN COOK COUNTY, ILLINOIS.

PARCEL 2:

EASEMENTS APPURTENANT TO AND FOR THE BENEFIT OR PARCEL 1 AS SET FORTH IN THE DECLARATION OF EASEMENTS MADE BY BURNSIDE CONSTRUCTION COMPANY AND RECORDED OCTOBER 25, 1976, AS DOCUMENT NUMBER 23684698 AND CREATED BY DEED FROM BURNSIDE CONSTRUCTION COMPANY TO ARTHUR R. PHILLE'S AND JUNE M. PHILLIPS, HIS WIFE. RECORDED DECEMBER 20, 1977, AS DOCUMENT NUMBER 24254195 FOR III. INGRESS AND EGRESS, IN COOK COULTY, ILLINOIS

Address commonly known as: 7821 W. Golf Drive #2B Palos Heights, IL 60464

PIN#: 23-36-303-143-1024