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# UNOFFICIAL COPY

## JOINT TENANCY AFFIDAVIT



STATE OF ILLINOIS )  
COUNTY OF COOK ) SS

Doc# 1715242081 Fee \$42.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 06/01/2017 03:35 PM PG: 1 OF 3

176322400466

Philip M. Pohrebny

hereby referred to as the affiant, states under oath that the affiant resides at

8337 S. Kenneth

In the City of Chicago,

State of Illinois;

that the affiant was acquainted with

Josephine Pohrebny,

the decedent; at the time of death, the decedent was one of the owners of property, by virtue of a property recorded joint tenancy deed, said property located in

Cook County, State of

Illinois, and legally

described as follows:

Lot 74 (except the West 6 feet, 3 inches) and the West 12 feet, 6 inches of Lot 75 in Block 15 in John F. Eberhart's Subdivision of the Northeast 1/4 of Section 23, Township 38 North, Range 13 East of the Third Principal Meridian, in Cook County, Illinois.

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 1, 1990, leaving no/a last will and testament;

The total value of decedent's estate, including the taxable interest in the above property was \$ 100,000.00, and that the value of the above property individually was \$ 50,000.00.

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.

Property Address: 3354 W. Marquette Road  
Chicago, Illinois 60629

Permanent Tax No: 19-23-230-036-0000

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

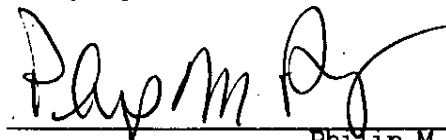
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## JOINT TENANCY AFFIDAVIT (continued)

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:

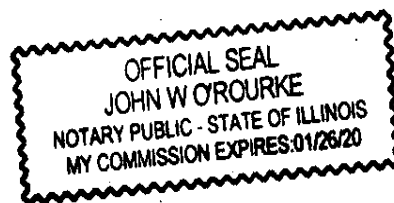
1. Claims against the estate of Josephine Pohrebny, the decedent;
2. State Estate/Inheritance Tax and Federal Estate Tax that may be charged against the estate of said decedent;
3. Legacies, if any, created by the will of said decedent;
4. Rights of contribution.

  
 \_\_\_\_\_ (Seal)  
 Philip M. Pohrebny  
 \_\_\_\_\_ (Seal)

Subscribed and sworn to before me this:

24<sup>th</sup> day of May, 2017  
 \_\_\_\_\_ (Month) \_\_\_\_\_ (Year)

  
 \_\_\_\_\_ (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 O'Rourke  
 \_\_\_\_\_ (Name)  
4239 W. 63rd Street  
 \_\_\_\_\_ (Address)  
Chicago, IL 60629  
 \_\_\_\_\_ (City, State, Zip)

Return to:

John O'Rourke  
 \_\_\_\_\_ (Name)  
4239 W. 63rd Street  
 \_\_\_\_\_ (Address)  
Chicago, IL 60629  
 \_\_\_\_\_ (City, State, Zip)

# UNOFFICIAL COPY

STATE OF ILLINOIS  
County of Cook

DAVID ORR, County Clerk

April 6, 2017

I, David Orr, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and files of said County do hereby certify that the attached is the true and correct copy of the original Record on file, all of which appears from the records and files in my office. IN WITNESS THEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the City of Chicago, in said County.

David Orr

County Clerk

<b>DECEDENT'S BIRTH NO.</b>	<b>REGISTRATION DISTRICT NO.</b> 16.10	<b>STATE OF ILLINOIS</b>		<b>05-02408</b>	
<b>REGISTERED NUMBER</b>		<b>MEDICAL CERTIFICATE OF DEATH</b>			
Type of Area in Permanent Use: See Federal Clinician, Hospital, or Physician Handbook for Instructions.  A. 1-021  B. 6665  C. 700  D.  E.	<b>1. DECEASED NAME</b> FIRST MIDDLE LAST		<b>2. SEX</b>	<b>3. DATE OF DEATH</b> (MONTH DAY YEAR)	
	JULIA POHREBNY		2 FEMALE	FEBRUARY 1, 1990	
	<b>4. COUNTY OF DEATH</b>		<b>AGE - LAST BIRTHDAY (MRS)</b>	<b>UNDER 1 YEAR</b>	<b>UNDER 1 DAY</b>
	COOK		61	MO. DAYS	HOURS MIN.
	<b>5. CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER</b>		<b>HOSPITAL OR OTHER INSTITUTION NAME (IF NOT IN EITHER GIVE STREET AND NUMBER)</b>		<b>6. HOSP. OR INST. INDICATE D.O.A., OP. TIME, OR INPATIENT (SPECIFY)</b>
	CHICAGO		HOLY CROSS HOSPITAL		6C. INPATIENT
	<b>7. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)</b>		<b>MARRIED, NEVER MARRIED, WIDOWED, OR DIVORCED (SPECIFY)</b>	<b>8. NAME OF SURVIVING SPOUSE (MARRIED NAME IF APPLICABLE)</b>	
	Chicago IL		8a. Married	8b. John Pohrebny	
	<b>8. SOCIAL SECURITY NUMBER</b>		<b>9. USUAL OCCUPATION</b>	<b>10. KIND OF BUSINESS OR INDUSTRY</b>	<b>11. EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)</b>
	1-021-6665-700		11a. Homemaker	11b. Own Home	12. 12
<b>12. RESIDENCE (STREET AND NUMBER)</b>		<b>13. CITY, TOWN, OR ROAD DISTRICT NO.</b>	<b>14. INSIDE CITY (YES/NO)</b>	<b>15. COUNTY</b>	
13a. 3754 W. 67th St.		13b. Chicago	14c. Yes	15a. Cook	
<b>16. STATE</b>		<b>17. ZIP CODE</b>	<b>18. RACE (WHITE, BLACK, AMERICAN INDIAN OR ALASKA NATIVE, HISPANIC OR LATINO)</b>	<b>19. OF HISPANIC ORIGIN? (SPECIFY WHETHER YES OR NO. IF YES SPECIFY CUBAN, MEXICAN, PUERTO RICAN, ETC.)</b>	
16a. IL		17a. 60629	18a. White	19a. NO	
<b>20. FATHER'S NAME</b> FIRST MIDDLE LAST		<b>21. MOTHER'S NAME</b> FIRST MIDDLE LAST			
John Ruddek		Anna Not Available			
<b>22. COHABITANT'S NAME (TYPE OR PRINT)</b>		<b>23. RELATIONSHIP</b>	<b>24. MARRIAGE ADDRESS (STREET AND NO. AND CITY, TOWN, STATE, ZIP)</b>		
John Pohrebny		23a. Husband	17c. 3754 W. 67th St. Chicago IL 60629		
<b>25. PART I: (From the physician's report or completed by the coroner. Do not enter the mode of dying, such as cardiac arrest, or a legal determination of death, but state the cause and manner of death.)</b>		<b>26. IMMEDIATE CAUSE (Final disease or condition resulting in death)</b>			
		CARDIOGENIC SHOCK			
<b>27. CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.</b>		(b) DUE TO OR AS A CONSEQUENCE OF CONGESTIVE HEART FAILURE			
		(c) STATUS POST AORTIC VALVE REPAIR			
<b>28. PART II: (Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.)</b>		<b>29. AUTOPSY (YES/NO)</b>			
OSTEOMYELITIS AND INFECTED PROSTHETIC KNEE AND ANKLE WITH STAPHYLOCOCCUS AUREUS		29a. NO			
<b>30. DATE OF OPERATION, IF ANY</b>		<b>31. MAJOR FINDINGS OF OPERATION</b>			
20a.		20b.			
<b>32. (1) (a) DID HE/ SHE ATTEND THE DECEASED AND (b) LAST SAW HIM/ HER ALIVE ON</b>		<b>33. WAS HE/ SHE A DOCTOR OR MEDICAL EXAMINER? (YES/NO)</b>	<b>34. HOUR OF DEATH</b>		
21a. 2-1-90		33a. NO	21c. 11:25P		
<b>35. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED</b>		<b>36. DATE SIGNED</b> (MONTH DAY YEAR)			
22a. SIGNATURE: S. Prasad Tummala		22b. 2-2-90			
<b>37. NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT)</b>		<b>38. ILLINOIS LIC. # (M.D. OR N.P.)</b>			
22c. 6132 S. KEDZIE AVE. CHICAGO, IL 60629		38a. 36-48047			
<b>39. NAME OF ATTENDING PHYSICIAN (IF OTHER THAN CERTIFIER) (TYPE OR PRINT)</b>		<b>40. NOTE: IF AN AUTOPSY WAS PERFORMED ON THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED</b>			
23a. Daniel Ruddek					
<b>41. BURIAL, CREMATION, REMOVAL (SPECIFY)</b>		<b>42. CEMETERY OR CREMATORY NAME</b>	<b>43. LOCATION</b> CITY OR TOWN STATE	<b>44. DATE</b> (MONTH DAY YEAR)	
24a. Burial		24b. St. Mary	24c. Evergreen Pk. IL	24d. Feb. 5 1990	
<b>45. FUNERAL HOME</b> NAME STREET AND NUMBER (CITY, STATE ZIP)		<b>46. LOCAL REGISTRAR'S SIGNATURE</b>			
25a. Rordilsky-Southwest, Charles 5040 So. Western Ave. Chicago IL 60609		25b. Daniel Ruddek			
<b>47. LOCAL REGISTRAR'S SIGNATURE</b>		<b>48. DATE FILED BY LOCAL REGISTRAR (MONTH DAY YEAR)</b>			
26a. David Orr		48a. FEB 03 1990			