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1815641022

JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS)
) SS
COUNTY OF COOK)

Doc# 1815641022 Fee \$42.00

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

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 06/05/2018 09:33 AM PG: 1 OF 3

Elaine M. Kocolowski,
hereby referred to as the affiant, states under
oath that the affiant resides at
10536 Kildare Avenue

In the City of Oak Lawn,
State of Illinois;

that the affiant was acquainted with
George Jarzynski,

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:

18033260804

The West 10 feet of Lot 3 and Lot 4 (except the West 5 feet) in Block 2 in
Egerton Adams Subdivision of the Northwest 1/4 of the Northeast 1/4 of Section
15, Township 38 North, Range 13 East of the Third Principal Meridian, in Cook
County, Illinois.

2/6

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 January 5, 1995, leaving no/a last will and testament;

The total value of decedent's estate, including the taxable interest in the above property was \$ 25,000.00, 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: 4239 W. 55th Street
Chicago, Illinois 60632

Permanent Tax No: 19-15-202-059-0000

Attorney's Title Guaranty Fund, Inc.
1 S. Wacker Dr. Ste. 2400
Chicago, IL 60606-4650
Recording Department

S V
P 13
S N
SC X
INT (B)

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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:

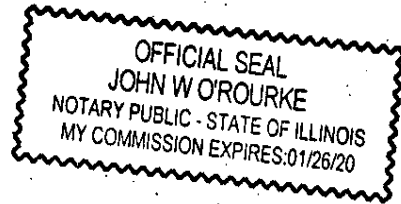
1. Claims against the estate of George Jarzynski, the decedent;
2. State Estate/Inheritance Tax and Federal Estate Tax that may be charged against the estate of said decedent;
3. Legacies, if any, created by the will of said decedent;
4. Rights of contribution.

Elaine Kocolowski (Seal)
 Elaine Kocolowski (Seal)

Subscribed and sworn to before me this

20th day of April, 2018
 (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 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)

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STATE OF ILLINOIS

MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 16.10 REGISTERED NUMBER

Form containing fields for deceased name (George F. Jarzynski), date of death (Jan 5, 1995), cause of death (Acute Extensive Anterior Myocardial Infarction), and certifier information (Sheila Lynne RSW).

STATE OF ILLINOIS COUNTY OF COOK CITY OF CHICAGO

JAN 6 1995

I, SHEILA LYNE, RSW, LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILLBIRTHS AND DEATHS FOR THE CITY OF CHICAGO BY VIRTUE OF THE LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO; THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY OF A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES.



THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

Vertical text on the left edge of the page, including 'BIRTH NO.', 'nt in', '7 INK', 'ctors,', 'sicians', 'for', 'DMS', 'USED', 'ITS', 'E', 'ER', 'ION'.