UNOFFICIAL COPY

JOINT TENANCY AFFIDAVIT

State of Illinois)
) SS
County of Cook)

LINDA EATON, hereby referred to as the affiant, states under oath that the affiant resides at 4532 N. Reserve, Chicago,



Doc# 1833016036 Fee \$42.00

RHSP FEE: \$9,00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 11/26/2018 12:26 PM PG: 1 OF 3

Illinois 60656; that the affiant is the widower of DAVID EATON, the decedent; that at the time of death, the decedent was one of the owners of the property with Linda Eaton, his wife, by virtue of a properly recorded joint tenancy warranty deed, said property, located in Cook County, Illinois, and legally described as follows:

Lot Seven (7) in block Two (2) in Schorsch Bros. Resubdivision of Lots 1 to 23, both inclusive, in Block One (1) and all of Block Two (2) in the resubdivision of Blocks 1, 2 and 3, in Schorsch Forest View Unit 2, being a Subdivision of part of the Northwest Quarter (1/4) of section 14, Township 40 North Range 12, east of the Third Principal Meridian, according to Plat of said Schorsch Bros. Resubdivision, registered in the Office of the Registrar of Tittles of Cook County, Illinois, on May 1, 1958, as Document Number 1793700.

P.I.N.: 12-14-109-068-0000

Commonly Known As: 4532 N. Reserve, Chicago, Illinois 60656

That the decedent had no interest in any business or par nership, 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;

That the decedent died on September 6, 20185- leaving no last will and testamency

That the total value of decedent's estate, including the taxable interest in the above property was \$300,000 and that the value of the above property individually was \$300,000.

That the Illinois Estate Tax and the Federal Estate Tax, if any, was not due from the decedent's estate;

The affiant hereby covenants and agrees that the following items have been paid or satisfied, if any;

- 1. Claims against the Estate of David Eaton, the decedent.
- 2. Illinois State Inheritance Tax and Federal Estate Tax which may be charged against the estate of said decedent;

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3. Legacies, if any, created by the will of said decedent.

4. Rights of contribution.

Subscribed and sworn to before me this

15th day of November, 2018.

Notary Public

Prepared by:

Mail to:

James A. Marin 5 5521 N. Cumberland James A. Marino 5521 N. Cumberland

Suite 1109

Suite 1109

Chicago, Illinois 60656

Chicago, Illinois 60656

"OFFICIAL SEAL" ROSIE DICRISTOFANO

Notary Public, State of Illinois My Commission Expires 9/7/2022

Note: If the decedent left a will, it will be recessary that the original or certified copy thereof be presented to us for inspection. A death certificate, together with evidence of payment of death taxes, if any, should accompany this affidavit.

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

STATE FILE NUMBER 2018 00	72685				DATE ISSUED 9/12/2018
DECEDENT'S LEGAL NAME DAVID JEATON				5 4 6 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	OF DEATH PTEMBER 06, 2018
COUNTY OF DEATH	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	E AT LAST BIRTHDAY 83 YEARS	the state of the Transfer	OF BIRTH RIL 26, 1935	
CITY OR TOWN CHICAGO		. 606 - 3108 5660 11140111	PITAL OR OTHER INSTITUT 32 N RESERVE AVE	1 A 24 TO 1 TO	
PLACE OF DEATH DECEDENT'S HOME					
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NU	MARRIED		POUSEJCIVIL UNION PARTNER'S MAI MALDONADO	DEN NAME EVER IN U.S. ARMED FORCES? YES
RESIDENCE 4532 N RESERVE		APT NO	CHICAGO		INSIDE CITY LIMITS? YES
COOK IL		IERCO PARENTS NAME PRIOR TO ILLIAM EATON	DERST MARRIAGE/CIVIL UNION	MOTHER/CO PARENT'S NAME DOROTHY THILLY	PRIOR TO PIRST MARRIAGE/CIVIL UNION
INFORMANTS NAME LINDA EATON		RELATIONSHIP WIFE	MAILING AD 4532 N	DRESS RESERVE, CHICAGO, I	the control of the co
METHOD OF DISPOSITION BURIAL		DISPOSITION NTS CATHOLIC CEMETER	SPECIAL LANCE CONTRACTOR CONTRACTOR	CITY OR TOWN AND STATE INES, IL	DATE OF DISPOSITION SEPTEMBER 15, 2018
FUNERAL HOME CUMBERLAND CHAPEL	S, 8300 W LAWRE.	ICLAVE, NORRIDGE,	IL, 60706		
FUNERAL DIRECTOR'S NAME ROBERT C SNIDER				FUNERAL DIRECTORS IL 034015105	LINOIS LICENSE NUMBER
LOCAL REGISTRAR'S NAME DAVID ORR				DATE FILED WITH LOCAL SEPTEMBER 11	And the second of the second o
	RENAL CELL CARO	INOMA			E MONTHS
IMMEDIATE CAUSE (Final disease or condition		Due to (or as a	onsequence off	W A	6 MONTHS
resulting in death)	ь POLYMYALGIA RH				ONA ONA ONA ONA ONA ONA ONA ONA ONA ONA
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		Due to (or as a co	insequence of)		
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					PSY FINDINGS USED TO
FEMALE PREGNANCY STATUS				MANNER OF	
NOT APPLICABLE	TIME		E OF INJURY	NATURAL	INJURY AT WORK?
LOCATION OF INJURY					
DESCRIBE HOW INJURY OCCURRE	ED:			FT	RANSE JATATION INJURY, SPECIFY
ATTEND THE DECEASED?	DATE LAST SEEN ALIVE: JULY 18, 2018	WAS MEDICAL EXAMI CORONER CONTACT	A 4 4 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	TE PRONOUNCED	TIME OF DEATH
CERTIFIER PHYSICIAN					e CERTIFIED EPTEMBER 09, 2018
NAME, ADDRESS AND ZIP CODE O JOSEPH SADOWSKI, 61	- 大阪学 - アール・ 自然が 20-12	表演者 1886年 1888年 主選	ILLINOIS, 60631		HYSICIANS LICENSE NUMBER 36070143
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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.



