

When Recorded Return to:
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St. Paul, MN 55108

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After Recording Return to:

Amrock
662 Woodward Avenue
Detroit, MI 48226

Instrument Prepared By:

Kimberly Vereb, Esq.
1174 Red Dunes Run
Avon, IN 46123
IL Bar ID No. 6244816

Mail Tax Statements To:

Michelle Babikian
615 Charlemagne Drive
Northbrook, IL 60062

Tax Parcel ID Number:

04-06-407-013-0000

Order Number:

65206574 - 4824000

Record 1st
81239065



1905217052

Doc# 1905217052 Fee \$46.25

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

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 02/21/2019 10:32 AM PG: 1 OF 4

AFFIDAVIT OF DEATH OF JOINT TENANT

State of Illinois
County of Cook ss.

Affiants, **MICHELLE BABIKIAN** and **HELEN BABIKIAN**, being duly sworn, state that they reside at 615 Charlemagne Drive, Northbrook, IL 60062. That they were acquainted with **NISHAN BABIKIAN** a/k/a **NISHAN J. BABIKIAN**, Deceased, who at the time of his death was one of the owners of the land described and referred to herein, located in Cook County, Illinois, and described as:

See Exhibit A attached hereto and made a part hereof

Affiants state that the decedent died on December 29, 2011, as evidenced by a certified copy of the 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, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of Cook County, Illinois about _____.

Affiant states that the total value of the decedent's estate for Illinois Estate Tax and Federal Estate Tax purposes does not exceed \$4 million dollars.

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Affiant makes this affidavit for that purpose of inducing the CHICAGO TITLE INSURANCE COMPANY to issue its Title Insurance Policy, describing the above mentioned property.

Date: 11/23/19

IN TESTIMONY WHEREOF, WITNESS the signature of the Affiant on the date first written above.

Michelle Babikian

MICHELLE BABIKIAN

Heleen Babikian

HELEN BABIKIAN

STATE OF Illinois

COUNTY OF COOK

ss.

Subscribed and sworn to before me by MICHELLE BABIKIAN and HELEN BABIKIAN on this 23rd day of November, 2019.

[Signature]
Notary Public

My Commission Expires: 8/14/20



Property of Cook County Clerk's Office

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EXHIBIT A

The following described property, situated in the County of Cook, State of Illinois, to-wit:

Lot 353 in Charlemagne Unit Three, being a Subdivision in Section 6, Township 42 North, Range 12, East of the Third Principal Meridian, according to the plat thereof registered in the Office of the Registrar of Titles of Cook County, Illinois, on October 25, 1967 as Document 2355520.

Property Address: 615 Charlemagne Drive, Northbrook, IL 60062

Assessor's Parcel No.: 04-06-407-013-0000



U06912205

1371 2/1/2019 81239065/1

Property of Cook County Clerk's Office

CERTIFICATION OF DEATH RECORD

UNOFFICIAL COPY

COOK COUNTY CLERK-VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

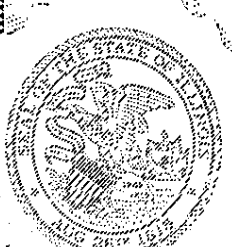
STATE FILE NUMBER 2011-0097338

DATE ISSUED 01/06/2012

DECEDENT'S LEGAL NAME NISHAN J BABIKIAN		SEX MALE	DATE OF DEATH DECEMBER 29, 2011		
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 90 YEARS	DATE OF BIRTH DECEMBER 03, 1921			
CITY OR TOWN DES PLAINES		HOSPITAL OR OTHER INSTITUTION NAME HOLY FAMILY HOSPITAL			
PLACE OF DEATH INPATIENT					
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE, CIVIL UNION PARTNER'S MAIDEN NAME HELEN DERMINASSIAN	EVER IN U.S. ARMED FORCES? YES	
RESIDENCE 615 CHARLEMAGNE DRIVE	APT. NO.	CITY OR TOWN NORTHBROOK	INSIDE CITY LIMITS? YES		
COUNTY COOK	STATE IL	ZIP CODE 60062	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION HAMPARTZOOM BABIKIAN	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION BEGHEGIA EGHIAN	
INFORMANT'S NAME HELEN BABIKIAN		RELATIONSHIP WIFE	MAILING ADDRESS 615 CHARLEMAGNE DRIVE NORTHBROOK, IL, 60062		
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION CACIA PARK CEMETERY	LOCATION - CITY OR TOWN AND STATE CHICAGO, IL	DATE OF DISPOSITION JANUARY 03, 2012	
FUNERAL HOME BELMONT FUNERAL HOME, 7120 WEST BELMONT AVENUE, CHICAGO, IL, 60634					
FUNERAL DIRECTOR'S NAME SCOTT A JOHNSON			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015925		
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR JANUARY 3, 2012		
CAUSE OF DEATH - PART I		LETHAL BRADYARRHYTHMIA		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a. _____ Due to (or as a consequence of):			DAYS
		b. HYPOTENSION Due to (or as a consequence of):			DAYS
		c. _____ Due to (or as a consequence of):			
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I SEPSIS, MULTI-ORGAN FAILURE, ACUTE ON CHRONIC RENAL FAILURE, ANASARCA, UREMIA, DISCITIS, ENCEPHALOPATHY, OSTEOMYELITIS			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 DECEMBER 28, 2011	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 09:09 AM	
CERTIFIER PHYSICIAN			DATE CERTIFIED DECEMBER 30, 2011		
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DOCTOR NANCY S. AWADALLAH, 100 NORTH RIVER ROAD, SUITE 200, DES PLAINES, ILLINOIS, 60016			PHYSICIAN'S LICENSE NUMBER 036114806		

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

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: FACILE SECURITY HOLOGRAPHIC FOLDS AT BOTTOM