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Doc# 2111119020 Fee \$88.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 04/21/2021 10:12 AM PG: 1 OF

Deceased Joint Tenancy Affidavit

State of Illinois)
)
County of COOK)

DOROTHY M. SCHMIDT (Affiant) being duly sworn states that SHE (he/she) resides at 1524 Blanchan Ave. in the City of La Grange Park, Illinois 60526. That SHE (he/she) was acquainted with her husband, RICHARD P. SCHMIDT, deceased, who at the time of HIS (his/her) death, was one of the owners of the land in COOK County, Illinois described as:

See Exhibit "A" attached hereto and made a part hereof

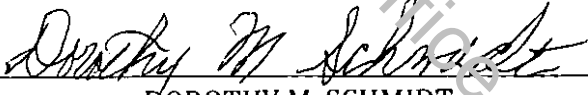
That the deceased died MARCH 11, 2021 as evidenced by a certified copy of the death certificate of the deceased attached hereto.

That the deceased died:

- Leaving no Last Will & Testament
- Leaving a Last Will & Testament a copy of which attached. 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 _____ County, Illinois about _____.

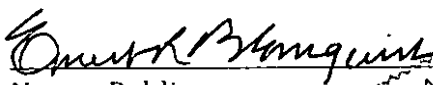
That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of \$ 50,000.00 dollars.

Affiant makes this Affidavit for the purpose of inducing any Title Insurance Company to issue its Title Insurance Policy, describing the above-mentioned property.



DOROTHY M. SCHMIDT

SUBSCRIBED AND SWORN to
before me this 9. day
of April, 2021.


Notary Public
OFFICIAL SEAL
ERNEST R. BLOMQUIST III
Notary Public, State of Illinois
My Commission Expires 12/27/2022

Prepared by:
ERNEST R. BLOMQUIST III
MASSUCCI, BLOMQUIST, ANDERSON & DUNN
750 WEST NORTHWEST HIGHWAY
ARLINGTON HEIGHTS, IL 60004-5399

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LEGAL DESCRIPTION

COMMONLY KNOWN AS: 1524 BLANCHAN AVENUE
LA GRANGE PARK, ILLINOIS 60526

PROPERTY INDEX NUMBER: 15-27-300-018-0000

LOT 6 IN BLOCK 3 IN CHICAGO TITLE AND TRUST COMPANY'S FOREST PRESERVE ADDITION TO LAGRANGE PARK, BEING A RESUBDIVISION OF THE WEST 1/2 OF THE WEST 122.02 ACRES OF THE SOUTH WEST 1/4 OF SECTION 27, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED MAY 9, 1924 AS DOCUMENT NO. 8408349 IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office

CERTIFICATION OF DEATH RECORD

UNOFFICIAL COPY

DUPAGE COUNTY HEALTH DEPARTMENT WHEATON, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER: 2021 0023810 MEDICAL EXAMINER'S CASE NUMBER: 031321-JG1 DATE ISSUED: 3/15/2021

DECEDENT'S LEGAL NAME RICHARD PAUL SCHMIDT			SEX MALE	DATE OF DEATH MARCH 11, 2021
COUNTY OF DEATH DU PAGE	AGE AT LAST BIRTHDAY 75 YEARS	DATE OF BIRTH APRIL 23, 1945		
CITY OR TOWN HINSDALE		HOSPITAL OR OTHER INSTITUTION NAME ADVENTIST HINSDALE 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 DOROTHY ZWERG	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 1524 BLANCHAN	APT. NO.	CITY OR TOWN LAGRANGE PARK	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60526	FATHER/CO-PARENTS NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JOHN SCHMIDT	MOTHER/CO-PARENTS NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION EVA JANSSON
INFORMANT'S NAME DOROTHY SCHMIDT		RELATIONSHIP WIFE	MAILING ADDRESS 1524 BLANCHAN, LAGRANGE PARK, IL, 60526	
METHOD OF DISPOSITION CREMATION	PLACE OF DISPOSITION OAK RIDGE CEMETERY	LOCATION - CITY OR TOWN AND STATE HILLSIDE, IL	DATE OF DISPOSITION MARCH 15, 2021	
FUNERAL HOME HITZEMAN FUNERAL HOME LTD, 9445 W 21ST STREET, BROOKFIELD, IL, 60513				
FUNERAL DIRECTOR'S NAME CHARLES T HITZEMAN			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015870	
LOCAL REGISTRAR'S NAME KAREN J AYALA			DATE FILED WITH LOCAL REGISTRAR MARCH 15, 2021	
CAUSE OF DEATH PART I. ASYSTOLE IMMEDIATE CAUSE a. _____ (Final disease or condition resulting in death) Due to (or as a consequence of): b. HYPOTENSION c. HEPATORENAL SYNDROME Due to (or as a consequence of):				
PART II. Enter other <i>significant conditions contributing to death</i> but not resulting in the underlying cause given in PART I.			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 MARCH 10, 2021	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 05:39 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED MARCH 11, 2021	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR RAVI YALAMANCHI, 1000 REMINGTON ROAD, BOLINGBROOK, ILLINOIS, 60439				PHYSICIAN'S LICENSE NUMBER 036 110206

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH



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.

Karen J. Ayala
Karen J. Ayala
Local Registrar

Not valid without the embossed seal of the DuPage County Health Department.