UNOFFICIAL COPY

This Document Prepared by ; and after Recording, Return To:

James V. Inendino, Esq. Roetzel & Andress 30 North LaSalle Street Suite 2800 Chicago, Illinois 60602

Return to

RETURN TO: Acquest Title Services, LLC 2800 W. Higgins Rd. # 189 Hoffman, Estates, IL 60169 Doc# 2206922008 Fee \$88.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 03/10/2022 10:05 AM PG: 1 OF 3

4bove space for recording purposes

DECEASED JOINT TENANT AFFIDAVIT

STATE OF ILLINOIS)
) SS.
COUNTY OF COOK)

Carlon B. Walker, a widower and not since remarkied, hereinafter referred to as the Affiant, being first duly sworn, on oath states that he resides at 2743 North Greenview Avenue, Chicago, IL 60614. That Affiant was married to Leonard Kniffel, the Deceased, at the time of the Deceased's death and was one of the owners of the property in the City of Chicago, Cook County, Illinois, described as follows:

LOT 12 IN THE SUBDIVISION OF LOT 1 IN LEMBEKE'S SUBDIVISION OF LOT 5 OF BLOCK 45 OF SHEFFIELD'S ADDITION TO CHICAGO IN THE WEST ½ OF THE SOUTHWEST ¼ OF SECTION 29, TOWNSHIF 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Permanent Real Estate Index Number:

14-29-302-010-0000

Address of Real Estate:

2743 North Greenview Avenue

Chicago, IL 60614

That the Deceased died on March 19, 2021, as evidenced by a copy of the Death Certificate of the Deceased attached hereto.



2206922008 Page: 2 of 3

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Carlon B. Walker

COUNTY OF COOK)	
)	SS.
STATE OF ILLINOIS)	

I, the unders gred, a Notary Public in and for said county, DO HEREBY CERTIFY that Carlon B. Walker, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that he signed, sealed and delivered the said instrument as his free and voluntary act, for the uses and purposes herein set forth.

Given under my hand and official seal, this 3rd day of March 2022.

NOTARY PUBLIC

17851735_1

CHRISTINE HEMMERICH
Official Seal
Notary Public - State of Illinois
My Commission Expires Dec 7, 2024

CHAPTE CARD TO FOR THE CARD

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

	1/2021
DECEDENT'S LEGAL NAME LEONARD JOHN KNIFFEL MALE MACH 19, 2021	
COUNTY OF DEATH AGE AT LAST BIRTHDAY COOK 73 YEARS DATE OF BIRTH AUGUST 25, 1947	
CITY OR TOWN HOSPITAL OR OTHER INSTITUTION NAME CHICAGO SWEDISH COVENANT HOSPITAL	
PLACE OF DEATH / INPATIENT	
BIRTHPLACE SOCIAL SECURITY NUMBER STATUS AT TIME OF DEATH SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME EVER IN U.S. ARME MOUNT CLEMENS, MI MARRIED CARLON BERNARD WALKER FORCES? NO	D
RESIDENCE APT. NO CITY OR TOWN INSIDE CITY LIMITS? 2743 N GREENVIEW AV 3	
COUNTY STATE ZIP CODE FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION LUCILLE BRODACKI	ON
INFORMANT'S NAME RELATIONSHIP MAILING ADDRESS CARLON BERNARD WALKER SPOUSE 2743 N GREENVIEW AVE, CHICAGO, IL, 60614	
METHOD OF DISPOSITION LOCATION CITY OR TOWN AND STATE DATE OF DISPOSITION LOCATION CITY OR TOWN AND STATE DATE OF DISPOSITION OR CREMATION SERVICES NORTHLAKE IL MARCH 22, 2021	S Ma
FUNERAL HOME SIMPLICITY FUNERAL & CREMATION CARE 10 DARIEN PATH WAY, DARIEN IL, 60561	
FUNERAL DIRECTOR'S NAME DAVID_FISHER_JR DAVID_FISHER_JR	1 may 199
LOCAL REGISTRAR'S NAME KAREN'A YARBROUGH MARCH 23, 2021	
CAUSE OF DEATH	
(Final disease of condition Die to lof as a congress of) resulting in death) b.	
Due to (or as a consequence of)	
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! WAS AN AUTORSY PERFORMED? NO	46 3.3
WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
FEMALE PREGNANCY STATUS NOT APPLICABLE NATURAL	
DATE OF INJURY PLACE OF INJURY INJURY AT WORKS	· 133
LOCATION OF INJURY	
DESCRIBE HOW INJURY OCCURRED. IF TRANSP. O ATION INJURY, SPECI	FY:
ATTEND THE DECEASED? DATE LAST SEEN ALIVE WAS MEDICAL EXAMINER OR DATE PRONOUNCED TIME OF DEATH OP 09:00 AM	
CERTIFIER PHYSICIAN Date CERTIFIED MARCH:22, 2021	
NAME ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH MARK WATSON DO, 606 POTTER RD, DES PLAINES, ILLINOIS, 60016 PHYSICIAN'S LICENSE NUMBER 0361337427 2 / 1 5 2	



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 A. Yarbrough Cook County Clerk

