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Karen A. Yarbrough
Cook County Clerk
Date: 12/06/2023 10:02 AM Pg: 1 of 4

1073

JOINT TENANCY AFFIDAVIT

STATE OF IL)
) SS
COUNTY OF COOK)

Robert W Lindahl,
hereby referred to as the affiant, states under
oath that the affiant resides at
21 W 761 S CHARLES RD

In the City of WEST CHICAGO ;
State of Illinois ;
that the affiant was acquainted with
James F Lindahl ;
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
State of Illinois, and legally

described as follows:

LOT 1 (except 243 feet thereof), all of Lot 2 and the
East 8.28 of Lot 3 in Block 10 in Westwood, being
Mills and Sons Subdivision in the West 1/2 of Section 25,
Township 40 North, Range 12 East of the Tenth
Principal Meridian in Cook County, Illinois

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 MAY 21, 2003, leaving no/a last will and testament;

The total value of decedent's estate, including the taxable interest in the above property was \$ less than 15,000.00, and that the value of the above property individually was \$ less than 15,000.00.

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.

COMMON ADDRESS: 7905 W MERROPLE ST
EMMERTON PARK, IL 60707

PIN: 12 25-109-053-0000

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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 James F Lindahl, 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.

Robert W Lindahl

Robert W Lindahl

(Seal)

(Seal)

Subscribed and sworn to before me this

3rd day of November, 2023

[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:

David R Schlueter

(Name)

401 W Irving Park Road

(Address)

Itasca IL 60143

(City, State, Zip)

Return to:

David R Schlueter

(Name)

401 W Irving Park Road

(Address)

Itasca IL 60143

(City, State, Zip)

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 **Advocus** National Title Insurance Company™

LEGAL DESCRIPTION

Permanent Index Number:

Property ID: 12-25-109-053-0000

Property Address:

7905 W Metropole St
Elmwood Park, IL 60707

Legal Description:

Lot 1 (except E43 feet thereof), all of Lot 2 and the East 8.28 feet of Lot 3 in Block 10 in Westwood, being Mills and Sons Subdivision in the West 1/2 of Section 25, Township 40 North, Range 12, East of the Third Principal Meridian in Cook County, Illinois.

Property of Cook County Clerk's Office

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EXHIBIT

DECEDENT'S BIRTH NO.		REGISTRATION DISTRICT NO. 320		STATE OF ILLINOIS		STATE FILE NUMBER	
REGISTERED NUMBER		MEDICAL CERTIFICATE OF DEATH					
Type of Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS		DECEASED-NAME FIRST MIDDLE LAST JAMES F LINDAHL		SEX 2 MALE		DATE OF DEATH (MONTH, DAY, YEAR) 3 MAY 21, 2003	
COUNTY OF DEATH 4 DuPage		AGE - LAST BIRTHDAY (YRS. MOS. DAYS) 5a. 56		UNDER 1 YEAR UNDER 1 DAY 5b. 5c.		DATE OF BIRTH (MONTH, DAY, YEAR) 5d. July 7, 1946	
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER 6a. Elmhurst		HOSPITAL OR OTHER INSTITUTION NAME (IF NOT OTHER, GIVE STREET AND NUMBER) 6b. Elmhurst Memorial Hospital		IF HOME OR INST. INDICATE D.O.A. OR FORMAL INPATIENT (SPECIFY) 6c. Inpatient			
BIRTH-PLACE (CITY AND STATE OR FOREIGN COUNTRY) 7. Chicago, IL		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) 8a. Married		NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) 8b. Ava Marie Bertucci		WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO) 9. No	
SOCIAL SECURITY NUMBER 10.		USUAL OCCUPATION 11a. Management		KIND OF BUSINESS OR INDUSTRY 11b. Government		EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) 12. 12 College (4-yr) 13. 5+	
RESIDENCE (STREET AND NUMBER) 13a. 216 E. Vermont		CITY, TOWN, TWP. OR ROAD DISTRICT NO. 13b. Villa Park		INSIDE CITY (YES/NO) 13c. Yes		COUNTY 13d. DuPage	
STATE 13e. Illinois		ZIP CODE 13f. 60181		RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY) 14a. White		OF HISPANIC ORIGIN? (SPECIFY YES OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.) 14b. NO YES SPECIFY:	
FATHER-NAME FIRST MIDDLE LAST 15. Lawrence Lindahl		MOTHER-NAME FIRST MIDDLE LAST (MAIDEN) 16. Evelyn O'Malley					
INFORMANT'S NAME (Type or Print) 17a. Ava Marie Lindahl		RELATIONSHIP 17b. Wife		MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) 17c. 216 E. Vermont, Villa Park, IL 60181			
PART I. Enter the diseases, or combinations that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or renal failure. List only one cause on each line.		IMMEDIATE CAUSE (Final disease or condition resulting in death) (a) Respiratory arrest 2nd status epilepticus		APPROPRIATE INTERVAL BETWEEN ONSET AND DEATH			
CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.		DUETO, OR AS A CONSEQUENCE OF (b)					
PART II. One or more conditions contributing to death but not resulting in the underlying cause given in PART I.		DUETO, OR AS A CONSEQUENCE OF (c)					
DATE OF OPERATION, IF ANY 20a.		MAJOR FINDINGS OF OPERATIC 20b.		AUTOPSY (YES/NO) 19a. NO		IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? 19b.	
DID (X) DID NOT ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE (MONTH, DAY, YEAR) 21a. 5-21-03		WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) 21b. No		HOUR OF DEATH 21c. 10:00 A.M.			
TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND JUST TO THE CAUSE(S) STATED.		SIGNATURE 22a. [Signature]		NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) 22b. MELROSE PARK, IL 4 W. NORTH AVE. 60160		DATE SIGNED (MONTH, DAY, YEAR) 22c. 5-22-03	
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT) 23. [Signature]		ILLINOIS LICENSE NUMBER 23d. 36-94399		NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.			
BURIAL, CREMATION, REMOVAL (SPECIFY) 24a. Burial		CEMETERY OR CREMATORY-NAME 24b. Queen of Heaven		LOCATION - CITY OR TOWN STATE 24c. Hillside, Illinois		DATE (MONTH, DAY, YEAR) 24d. May 24, 2003	
FUNERAL HOME NAME STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE ZIP 25a. Steuerle/Funeral Home 350 S. Ardmore Ave, Villa Park, Illinois 60181		FUNERAL DIRECTOR'S SIGNATURE 25b. [Signature]		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 25c. 034-01652		DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) 26a. [Signature]	
LOCAL REGISTRAR'S SIGNATURE 26a. [Signature]		DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) 26b. MAY 23 2003					



DuPage County Health Department

111 North County Farm Road
Wheaton, Illinois 60187

This is to certify that this is a true and correct copy of the official record filed with the Illinois Department of Public Health.

Deland Lewis
Local Registrar

Not valid without the embossed seal of DuPage County Health Department