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DECEASED JOINT TENANCY AFFIDAVIT

Doc# 2420726011 Fee \$93.00

ILRHSP FEE:\$18.00 RPRF FEE:\$1.00
CEDRIC GILES

COOK COUNTY CLERK'S OFFICE

DATE: 7/25/2024 9:58 AM

PAGE: 1 OF 3

MAIL TO:

John S. Young

900 E Northwest Hwy
Mount Prospect, IL 60056

PREPARED BY:

JOHN S. YOUNG
900 E. NW HWY.
MOUNT PROSPECT, IL 60056

(The Above Space For Recorder's Use Only)

STATE OF ILLINOIS)
)
COUNTY OF COOK)

S.

ROBERT C. ATKINSON, hereinafter called Affiant(s), being duly sworn states that he/she/they resides at: 5858 N. Louise Ave., Chicago, Illinois 60646. That Affiant(s) was/were acquainted with MARGARET E. ATKINSON, hereinafter referred to as Decedent, and at the time of Decedent's death, was one of the owners of the land in COOK County, Illinois, described as:

SEE ATTACHED FOR LEGAL DESCRIPTION

PIN: 13-04-417-006-0000

Address: 5858 N. Louise Ave., Chicago, Illinois 60646

That Decedent died on December 31, 2013, as evidenced by a copy of Decedent's death certificate attached hereto.

That the Decedent, at the time of his/her death, held his/her share of the above referenced property as a Joint Tenant or Tenant by the Entirety and that the Decedent died leaving a will/ leaving no last will and testament.

That the total value of the estate of the Decedent, for estate tax purposes, including both real and personal property owned by the Decedent either individually or in Joint Tenancy or Tenancy by the Entirety at the time of the Decedent's death, does not exceed the sum of Five Million Dollars (\$ 5,000,000.00).

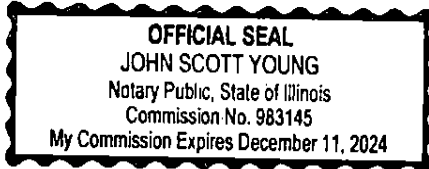
Affiant makes this Affidavit for the purpose of any individual or corporation who may be harmed by the Affiant's lack of veracity.

Subscribed and sworn before me
this 17 day of June, 2024.

NOTARY PUBLIC

Robert C Atkinson

AFFIANT'S SIGNATURE



S Y
P 3
S 1
SC Y
INT 20

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LEGAL DESCRIPTION

LOT 78 IN EDGEBROOK PARK FIRST ADDITION, BEING A SUBDIVISION OF PART OF LOT 4 IN THE ASSESSOR'S DIVISION OF LOT 2 IN BILLY CALDWELL'S RESERVE IN SECTION 4, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office

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

STATE FILE NUMBER 2013 Q100140

DATE ISSUED 1/10/2014

DECEDENT'S LEGAL NAME MARGARET E ATKINSON			SEX FEMALE	DATE OF DEATH DECEMBER 31, 2013	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 69 YEARS	DATE OF BIRTH SEPTEMBER 17, 1944		
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME SWEDISH COVENANT HOSPITAL			
PLACE OF DEATH INPATIENT					
BIRTHPLACE CHICAGO, IL	SOC <i>Widow</i>	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME ROBERT ATKINSON		EVER IN U.S. ARMED FORCES? NO
RESIDENCE 5858 NORTH LOUISE		APT. NO.	CITY OR TOWN CHICAGO		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60646	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION CARL TERMINI		MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION HELEN CZEPINSKI
INFORMANT'S NAME ROBERT ATKINSON		RELATIONSHIP HUSBAND	MAILING ADDRESS 5858 NORTH LOUISE, CHICAGO, IL, 60646		
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION SMITH FAMILY CREMATION SERVICE	LOCATION - CITY OR TOWN AND STATE SKOKIE, IL	DATE OF DISPOSITION JANUARY 08, 2014	
FUNERAL HOME SMITH-CORCORAN FUNERAL HOME - CHICAGO, 6150 N CICERO AVE, CHICAGO, IL, 60646					
FUNERAL DIRECTOR'S NAME SANDRA J ANTABLIAN			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014701		
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR JANUARY 7, 2014		
CAUSE OF DEATH PART I. CARDIAC ARREST					
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a. _____ Due to (or as a consequence of):		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
		b. HYPERTENSION			
		c. _____ 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 I				WAS AN AUTOPSY PERFORMED? NO	
				WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
FEMALE PREGNANCY STATUS NOT PREGNANT WITHIN LAST YEAR			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 31, 2013	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 05:15 PM	
CERTIFIER PHYSICIAN			DATE CERTIFIED JANUARY 07, 2014		
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH IRINA DANIEL, 6225 WEST TOUHY AVENUE, CHICAGO, ILLINOIS, 60646				PHYSICIAN'S LICENSE NUMBER 036-125559	

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: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM