

# UNOFFICIAL COPY

89448410



## Chicago Title Insurance Company

### DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS  
COUNTY OF

} ss.

Order No. \_\_\_\_\_

PAULINE LOITZ, being duly sworn  
states that she resides at 5701 N. Sheridan Rd. in the City of  
Chicago, Illinois

That she was acquainted with AUGUSTA LASKOV  
deceased who, at the time of her death, was one of the owners of the land in Cook  
County, Illinois, described as:

LOTS 19 to 23, BOTH INCLUSIVE, AND PART OF LOT 24 IN BLOCK 21 IN COCHRAN'S  
SECOND ADDITION TO EDGEWATER, TOGETHER WITH PART OF THE LAND LYING BETWEEN  
THE LAST LINE OF SAID LOTS AND THE WEST BOUNDARY LINE OF LINCOLN PARK, ALL  
IN THE EAST FRACTIONAL 1/2 OF SECTION 5, TOWNSHIP 40 NORTH, RANGE 14, EAST  
OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

COMMONLY KNOWN AS: Unit 7P at the Hollywood Towers Condominium  
5701 N. Sheridan Road  
Chicago, Illinois

12.00

That the deceased died February 15, 1989, as evidenced by a  
certified copy of 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 \_\_\_\_\_ 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 SIXTY THOUSAND (\$60,000.00) dollars.

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.

Subscribed and sworn to before me by the said

Pauline Loitz

this 19<sup>th</sup> day of July, A.D. 19 \_\_\_\_\_

OFFICIAL SEAL  
NOTARY PUBLIC  
STATE OF ILLINOIS  
MY COMMISSION EXPIRES 1/31/91

Pauline Loitz  
(affiant's signature)

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*[Handwritten signature]*

**BOX 333**

LEVATINO & LEVATINO  
134 N. LA SALLE ST.  
CHICAGO, IL. 60602

RETURN TO:

22-41045-388 01848410

PROPERTY RECORDS  
COOK COUNTY, ILLINOIS

Property of Cook County Clerk's Office

1500



CLERK OF COOK COUNTY

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State of California, Health Services-Public Health Division, Bureau of Vital Statistics

Place of Certification: Contra Costa County Health Services - Martinez, California  
Date of Certification: FEB 27 1989

Signature of Certifying Official: *Charles [unclear]*  
Local Registrar: [unclear]

Statement: This is to certify that the above is a true and correct copy of facts recorded on the death record of the above named decedent as registered in this office.

34A. PLACE OF FINAL DISPOSITION: WEST LAMN CEMETERY, 1700 N. WORTHOSE, NORWOOD PARK, IL.  
34B. LICENSE NUMBER: 7402

35A. NAME OF FUNERAL DIRECTOR: Grant Miller Mortuary  
35B. LICENSE NO.: 171  
35C. SIGNATURE OF LOCAL REGISTRAR: *[Signature]*

36A. PLACE OF DEATH: 1601 Danacio Valley Road, Walnut Creek, CA  
36B. PLACE OF DEATH: 1601 Danacio Valley Road, Walnut Creek, CA  
36C. PLACE OF DEATH: 1601 Danacio Valley Road, Walnut Creek, CA

37A. DEATH THAT OCCURRED AT THE HOME: YES  
37B. DEATH THAT OCCURRED AT THE HOME: YES  
37C. DEATH THAT OCCURRED AT THE HOME: YES

38A. DEATH THAT OCCURRED AT THE HOME: YES  
38B. DEATH THAT OCCURRED AT THE HOME: YES  
38C. DEATH THAT OCCURRED AT THE HOME: YES

39A. DEATH THAT OCCURRED AT THE HOME: YES  
39B. DEATH THAT OCCURRED AT THE HOME: YES  
39C. DEATH THAT OCCURRED AT THE HOME: YES

40A. DEATH THAT OCCURRED AT THE HOME: YES  
40B. DEATH THAT OCCURRED AT THE HOME: YES  
40C. DEATH THAT OCCURRED AT THE HOME: YES

41A. DEATH THAT OCCURRED AT THE HOME: YES  
41B. DEATH THAT OCCURRED AT THE HOME: YES  
41C. DEATH THAT OCCURRED AT THE HOME: YES

42A. DEATH THAT OCCURRED AT THE HOME: YES  
42B. DEATH THAT OCCURRED AT THE HOME: YES  
42C. DEATH THAT OCCURRED AT THE HOME: YES

43A. DEATH THAT OCCURRED AT THE HOME: YES  
43B. DEATH THAT OCCURRED AT THE HOME: YES  
43C. DEATH THAT OCCURRED AT THE HOME: YES

44A. DEATH THAT OCCURRED AT THE HOME: YES  
44B. DEATH THAT OCCURRED AT THE HOME: YES  
44C. DEATH THAT OCCURRED AT THE HOME: YES

## CERTIFICATE OF DEATH

STATE OF CALIFORNIA

USE BLACK INK ONLY

1A. NAME OF DECEDENT: AGUSTA C. LASKOV

4. RACE: White

6. STATE OF BIRTH: IL

10A. FULL NAME OF FATHER: David Cohen

10B. STATE OF FATHER: IL

10C. FULL MAIDEN NAME OF MOTHER: Rosa Davidson

10D. STATE OF MOTHER: IL

11. SOCIAL SECURITY NUMBER: 357-32-4315

12. MILITARY SERVICE: NONE

13. USUAL OCCUPATION: Housewife

14. USUAL EMPLOYER: Own Home

15. USUAL OCCUPATION: Homemaker

16. USUAL EMPLOYER: Own Home

17. NUMBER OF HIGHEST GRADE COMPLETED: 16

18. USUAL OCCUPATION: Housewife

19. USUAL EMPLOYER: Own Home

20. USUAL OCCUPATION: Homemaker

21. USUAL EMPLOYER: Own Home

22. USUAL OCCUPATION: Homemaker

23. USUAL EMPLOYER: Own Home

24. USUAL OCCUPATION: Homemaker

25. USUAL EMPLOYER: Own Home

26. USUAL OCCUPATION: Homemaker

27. USUAL EMPLOYER: Own Home

28. USUAL OCCUPATION: Homemaker

29. USUAL EMPLOYER: Own Home

30. USUAL OCCUPATION: Homemaker

31. USUAL EMPLOYER: Own Home

32. USUAL OCCUPATION: Homemaker

33. USUAL EMPLOYER: Own Home

34. USUAL OCCUPATION: Homemaker

35. USUAL EMPLOYER: Own Home

36. USUAL OCCUPATION: Homemaker

37. USUAL EMPLOYER: Own Home

38. USUAL OCCUPATION: Homemaker

39. USUAL EMPLOYER: Own Home

40. USUAL OCCUPATION: Homemaker

41. USUAL EMPLOYER: Own Home

42. USUAL OCCUPATION: Homemaker

43. USUAL EMPLOYER: Own Home

44. USUAL OCCUPATION: Homemaker

45. USUAL EMPLOYER: Own Home

46. USUAL OCCUPATION: Homemaker

47. USUAL EMPLOYER: Own Home

48. USUAL OCCUPATION: Homemaker

49. USUAL EMPLOYER: Own Home

50. USUAL OCCUPATION: Homemaker

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