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Chicago Title Insurance Company

93958061

DECEASED JOINT TENANCY AFFIDAVIT

93958061

STATE OF ILLINOIS
COUNTY OF COOK

ss.

Order No. _____

ANNA D. SYKES

being duly sworn

states that she resides at 5738 South Sacramento in the City of Chicago, Illinois 60629

That she was acquainted with PETER J. SYKES

deceased who, at the time of his death, was one of the owners of the land in Cook County, Illinois, described as:

LOT SIXTEEN (16) IN BLOCK ONE (1) IN WINNEBAGO SUBDIVISION OF BLOCK THREE (3) OF MAHAN'S SUBDIVISION OF THE SOUTH HALF OF THE NORTH WEST QUARTER OF SECTION THIRTEEN (13), TOWNSHIP THIRTY-EIGHT (38) NORTH, RANGE THIRTEEN (13), EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

P.I.N.: 19-13-119-033-0000

ADDRESS: 5738 South Sacramento, Chicago, Illinois 60629

That the deceased died December 21, 1992 as evidenced by a certified copy of death certificate of the deceased attached hereto. DEPT. OF RECORDING \$29.00

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 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 _____ require the payment of Federal Estate or Illinois Inheritance Tax. dollars.

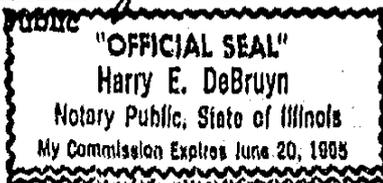
Affiant makes this affidavit for that purpose of inducing the Chicago Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to before me by the said

ANNA D. SYKES

this 10 day of November, A.D. 19 93

[Signature]
Notary Public



[Signature]
(affiant's signature)

ANNA D. SYKES

BOX 360

29.00
10

9 0 9 3 5 5 0 6 1

STATE FILE NUMBER

STATE OF ILLINOIS

MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 16:33
REGISTERED NUMBER 969

DECEASED-NAME FIRST MIDDLE LAST
PETER SYKES

1. COUNTY OF DEATH COOK
DATE OF DEATH MONTH, DAY, YEAR DECEMBER 21, 1992
SEX 2 MALE
DATE OF BIRTH MONTH, DAY, YEAR 54 OCTOBER 30, 1904

4. COOK
AGE-LAST BIRTHDAY (YES) 54 88
UNDER 1 YEAR 20 DAYS 30
HOSPITAL OR OTHER INSTITUTION-NAME IF NOT IN ITEM 1 (SEE STREET AND NUMBER) LITTLE COMPANY OF MARY HOSPITAL
CITY, TOWN, TWP. OR ROAD DISTRICT NO. CHICAGO

5a. EVERGREEN PARK
BIRTHPLACE (CITY AND STATE OR FOREIGN-COUNTRY) CHICAGO, ILLINOIS
MARRIED NEVER MARRIED, REWIDOWED, DIVORCED, SPECIFY MARRIED
7. CHICAGO, ILLINOIS
USUAL OCCUPATION MAIN INTERFERENCE
11a. MAN
10. 318-10-9582
RESIDENCE STREET NUMBER
13a. 5738 S SACRAMENTO
STATE ILLINOIS
ZIP CODE 60629

12. CHICAGO
CITY, TOWN, TWP. OR ROAD DISTRICT NO.
13c. CHICAGO
CITY, TOWN, TWP. OR ROAD DISTRICT NO.
13d. WHITE
RACE (WHITE, BLACK, AMERICAN INDIAN, NATIVE ALASKAN, HISPANIC ORIGIN (SPECIFY), OTHER SPECIFY)

14a. WHITE
FATHER-NAME FIRST MIDDLE LAST
15. ADAM SYKES ANNE
RELATIONSHIP (TYPE OR GROUP)
17a. LAURA TROJAN/CLERK
RELATIONSHIP (TYPE OR GROUP)
17b. RECORDS
STREET ADDRESS (CITY OR TOWN, STATE, ZIP)
17c. EVERGREEN PARK, ILLINOIS 60642

18. PART I
Enter the diagnosis or condition that caused the death. Do not list the mode of dying, such as cardiac or respiratory arrest.
(a) Acute Pulmonary Embolism
(b) DUE TO OR AS CONSEQUENCE OF
(c) DUE TO OR AS CONSEQUENCE OF
(d) DUE TO OR AS CONSEQUENCE OF

19. METROPOLITAN CENTER OF WOMEN, EMPHISAPENS
MANNER OF DEATH (TYPE OR GROUP)
20a. 9/12/2192
DATE OF OPERATION, F.A.M.Y.
20b. 12/21/92
DATE OF OPERATION, F.A.M.Y.
20c. 2:05A. M.
HOUR, DAY, YEAR
20d. 12-21-92
MONTH, DAY, YEAR
20e. 036-063403
ILLINOIS LICENSE NUMBER
20f. 3700 N. 63rd ST.
CITY OR TOWN, STATE, ZIP
20g. CHICAGO, ILLINOIS 60629
CITY OR TOWN, STATE, ZIP

21. SIGNATURE
NAME AND ADDRESS OF CERTIFYING PHYSICIAN (TYPE OR GROUP)
21a. SAMIR K. SHAH, MD
3317 WEST 15th Street
EMPHISAPENS TX 77-6064
21b. 12/21/92
DATE OF SIGNATURE
21c. 036-063403
ILLINOIS LICENSE NUMBER
21d. 3700 N. 63rd ST.
CITY OR TOWN, STATE, ZIP
21e. CHICAGO, ILLINOIS 60629
CITY OR TOWN, STATE, ZIP

22. ECAN FUNERAL HOME
FURNERAL DIRECTOR'S SIGNATURE
22a. ST. CASIMIR CEMETERY
STREET AND NUMBER OR R.F.D.
22b. CHICAGO, ILLINOIS
CITY OR TOWN, STATE, ZIP
22c. CHICAGO, ILLINOIS
CITY OR TOWN, STATE, ZIP
22d. 3700 N. 63rd ST.
CITY OR TOWN, STATE, ZIP
22e. CHICAGO, ILLINOIS 60629
CITY OR TOWN, STATE, ZIP
22f. 034-009759
FURNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER
22g. DECEMBER 21, 1992
DATE OF BURIAL

23. LOCAL HEALTH DEPARTMENT'S SIGNATURE
23a. Annette Thomas
23b. DECEMBER 21, 1992
DATE OF REGISTRATION

I HEREBY CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT COPY OF THE DEATH RECORD OF THE PERSON IN ITEM #1 AND THAT THIS RECORD WAS ESTABLISHED AND FILED IN MY OFFICE IN ACCORDANCE WITH THE PROVISIONS OF THE ILLINOIS STATUTES RELATING TO THE REGISTRATION OF BIRTHS, STILLBIRTHS AND DEATHS.

DATE DECEMBER 22, 1992
AT EVERGREEN PARK, ILLINOIS

REGISTRAR Annette Thomas
DEPUTY REGISTRAR

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Last Will and Testament

I, Peter J. Sykes of the City of Chicago, County of Cook, State of Illinois, declare this my Will and revoke all other wills and codicils that I may have made.

ARTICLE I

I direct that the expenses of my last illness, of my funeral and of the administration of my estate be paid out of the principal of my residuary estate.

ARTICLE II

All inheritance, estate and succession taxes, including interest and penalties payable by reason of my death shall be paid out of and be charge generally against the principal of my residuary estate without reimbursement from any person; except that my executor shall have the right to claim reimbursement for any such taxes which become payable on account of property over which I have power of appointment, on account of property, real or personal, held by me in joint tenancy or on account of any insurance policies on my life.

ARTICLE III

I give all my personal and household effects not otherwise effectively disposed of, such as jewelry, clothing, automobiles, furniture, furnishings, silver, books and pictures (including policies of insurance thereon, if feasible) to my wife, Anna D. Sykes, hereinafter referred to as "my wife", if she survives me for thirty days, or if she does not so survive me, to my children who survive me for thirty days, in shares of substantially equal value (to be divided as they shall agree, or if they fail to agree within six months after my death, as my executor shall determine).

ARTICLE IV

I give all my residuary estate, being all real and personal property wherever situated in which I may have any interest at the time of my death not otherwise effectively disposed of, but not including any property over which I have a power of appointment, as follows:

1. To my wife if she survives me, for thirty days, or
2. If my wife does not survive me, to my children per stirpes if they survive me for thirty days.

93958061

Notary Office

P. J. S.

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9 5 7 5 0 0 6 1
We have three children, Dorothy A. Vondranek, born June 14, 1940;
Loretta May Miller, born April 30, 1943 and George R. Sykes, born
February 22, 1947.

ARTICLE V

I appoint my wife executor of this will, and in the event she shall die, resign, fail to qualify or be unable or come to act, then Dorothy A. Vondranek, shall be executor of this Will. No security shall be required on the bond of any executor. The executor shall have the powers specified in Section 4 of the Illinois Trust and Trustees Act and any other powers that may be granted by law to be exercised in their discretion without court order or bond.

IN WITNESS WHEREOF I have signed this, my last will, typewritten on two (2) sheets of paper, and affixed my signature to the margin of each and every page hereof (including the AFFIDAVIT of Attesting Witnesses) on this 19th day of July, 1976.

x *Peter J. Sykes*

We now, Peter J. Sykes, in our presence, sign this instrument at his own request and he then declared it to be his will and requested us to act as witnesses to it; we believed him to be of sound mind and memory and not under duress or constraint of any kind; and then we, in his presence and in the presence of each other, signed our names as attesting witnesses; all of which was done on the date of this instrument.

Name	Address
<i>E. Jean Caldwell</i>	<i>1055 Boardwalk</i>
<i>Dorothy J. Betty</i>	<i>E. Lakeside Village</i>
<i>Laura R. Byrt</i>	<i>449 Sherwood Ln. Spring Park, Ill.</i>
	<i>1637 W. 1st</i>
	<i>Urbana, Ill.</i>

Signed and sworn to before me the 19 day of July, 1976

Notary Public

9395E061

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AFFIDAVIT OF ATTESTING WITNESSES

We saw PETER J. SYKES, in our presence, sign this instrument at its end; he then declared it to be his will and requested us to act as witnesses to it; we believed him to be of sound mind and memory and not under duress or constraint of any kind; and then we, in his presence and in the presence of each other, signed our names as attesting witnesses; all of which was done on the date of this instrument.

Name	Address
<u>E. Jean Caldwell</u> E. Jean Caldwell	<u>1013 Boardwalk</u> <u>Elk Grove Village, Ill.</u> 101-J Boardwalk Elk Grove Village, Ill.
<u>Dorothy F. Kelly</u> Dorothy F. Kelly	<u>449 Sherwood</u> <u>LaGrange Park, Ill.</u>
<u>David R. Bryant</u> David R. Bryant	<u>1639 Walnut</u> <u>Wilmette, Ill.</u>

Signed and sworn to
before me this 19 day
of July, 1976.

Notary Public

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939561

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