

UNOFFICIAL COPY

Attorneys' Title Guaranty Fund, Inc.,
94357529
ss.

STATE OF ILLINOIS

COUNTY OF Cook

94357529

DEPT-01 RECORDING \$23.50
T40000 TRAN 7290 04/21/94 09:56:00
\$5579 N-94-357529
COOK COUNTY RECORDER

JOINT TENANCY AFFIDAVIT

Beverly Rodewald, hereby referred to as the affiant, states under oath that the affiant resides at 3201 W. Des Plaines in the City of Woodlawn, Illinois; that the affiant was acquainted with James J. Rodewald, the decedent; that at the time of death, the decedent was one of the owners of the property, by virtue of a properly recorded joint tenancy warranty deed, said property, located in Cook County, Illinois, and legally described as follows:

That 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;

That the decedent died on 8/29/93, leaving no last will and testament;

That the total value of decedent's estate, including the taxable interest in the above property was \$ 114,000, and that the value of the above property individually was \$ 114,000.

That the Illinois Inheritance Tax and the Federal Estate Tax, if any was due from the decedent's estate, has been paid in full;

That the affiant makes this affidavit to induce Attorneys' Title Guaranty Fund, Inc. to issue its policy of title insurance on the above described property.

The affiant hereby covenants and agrees, for himself/herself/themselves, heirs, personal representatives or assignees, to forever fully indemnify, protect, defend and hold Attorneys' Title Guaranty Fund, Inc. harmless and to reimburse The Fund for all loss, costs, damages, suits, attorney's fees and expenses of every kind and nature which The Fund 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 J. Rodewald, the decedent;
2. Illinois State Inheritance Tax and Federal Estate Tax which may be charged against the estate of said decedent;
3. Legacies, if any, created by the will of said decedent;
4. Rights of contribution.

Beverly Rodewald (Seal)

(Seal)

Subscribed and sworn to before me this 14th day of April, 1994

Notary Public

" OFFICIAL SEAL "
SHAWN M. BOLGER
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES 10/27/95

Note: If the decedent left a will, it will be necessary that the original or certified copy thereof be presented to us for inspection. A death certificate, together with evidence of payment of death taxes, if any, should accompany this affidavit.

23.50
Shawn Bolger
10009 W. Grand Ave.
Franklin Park, IL 60131

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STATE OF ILLINOIS

MEDICAL CERTIFICATE OF DEATH

REGISTRATION NUMBER	16-0
LAST NAME	RODEWALD
MIDDLE NAME	
FIRST NAME	JAMES

DECEASED'S ADDRESS	ELK GROVE VILLAGE	NAME OF DECEASED	RODEWALD	SEX	MALE	DATE OF DEATH	JULY 29, 1993
TOWN OR CITY WHERE DECEASED LIVED	ELK GROVE VILLAGE	NAME OF MARRIED NAME	ALEXIAN BROTHERS HOSPICE HOME	RELATIONSHIP	NO	DATE OF DEATH	JANUARY 23, 1924
STREET ADDRESS	6343-26-8062	NAME OF MARRIED NAME	BEVERLY MILBRAD	RELATIONSHIP	NO	DATE OF DEATH	NO
CITY, STATE	ELK GROVE, IL	NAME OF OCCUPATION	LABORER	RELATIONSHIP	NO	DATE OF DEATH	NO
ZIP CODE	60164	NAME OF OCCUPATION	CONSTRUCTION	RELATIONSHIP	NO	DATE OF DEATH	NO
CITY, STATE	ELK GROVE, IL	NAME OF OCCUPATION	NORTHLAKE	RELATIONSHIP	NO	DATE OF DEATH	NO
ZIP CODE	60164	NAME OF OCCUPATION	WHITE	RELATIONSHIP	NO	DATE OF DEATH	NO
CITY, STATE	ELK GROVE, IL	NAME OF OCCUPATION	WHITE	RELATIONSHIP	NO	DATE OF DEATH	NO
ZIP CODE	60164	NAME OF OCCUPATION	WHITE	RELATIONSHIP	NO	DATE OF DEATH	NO
DECEASED'S RELATIONSHIP TO DECEASED		NAME OF DECEASED		RELATIONSHIP		NAME OF DECEASED	
JOAN LOBERG		RAYMOND RODEWALD		RELATIONSHIP		ETHEL CROSS	
PARTNER		HUSBAND		RELATIONSHIP		WIFE	
DECEASED'S SIGNATURE		DECEASED'S SIGNATURE		DECEASED'S SIGNATURE		DECEASED'S SIGNATURE	
I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the deceased named 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.		Signed <u>Madeline McCarney</u>					
Date AUG 05 1993							
At Cook County Department of Public Health Official Title Chief Deputy Registrar 1010 Lake St. Oak Park, Illinois 60301							

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the deceased named 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.

EXCECTED

DECEASED'S SIGNATURE	JOAN LOBERG	DATE OF DEATH	JULY 29, 1993
CREMATION	240 CREATIVATION SERVICE INC.	ROSEVENT, ILLINOIS	CHICAGO, ILLINOIS
SAC-TIEREMANN FUNERAL HOME	9568 BELMONT AVE.	FRANKLIN PARK, ILLINOIS	CHICAGO, ILLINOIS
KAREN L. TIERMAN, MD	7-30-93	034-012097	034-012097

State Department of Public Health - Director of Vital Statistics
RECEIVED IN THE OFFICE OF THE CHIEF DEPUTY REGISTRAR

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