

# JOINT TENANCY AFFIDAVIT

UNOFFICIAL COPY 96572179

STATE of ILLINOIS )  
 ) SS  
COUNTY OF COOK )

John H. Skipworth, hereby referred to as the affiant, states under oath that the affiant resides at 1820 Kingston in the City of Schaumburg, Illinois; that the affiant was acquainted with Delores J. Skipworth, the decedent; that at the time of death, the decedent was one of the owners of the property, by virtue of a properly

COOK COUNTY CLERK'S OFFICE  
240 N. LAKE ST. CHICAGO, ILL. 60601  
PHONE: 312-743-5721 FAX: 312-743-5722  
COOK COUNTY, ILLINOIS

96572179

96572179

recorded joint tenancy warranty deed, said property, located in Cook County, Illinois, and legally described as follows:

Lot 12437 in Weathersfield Unit 12, being a subdivision in the Northwest Quarter of Section 29, Township 41 North, Range 10, and the Southwest Quarter of Section 20, Township 41 North, Range 10, East of the Third Principal Meridian in Cook County, Illinois, according to the plat thereof recorded in the Recorder's office of Cook County, Illinois, on August 21, 1967 as Document #20234745.

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 FEB 4, 1989, leaving ~~no~~ a last will and testament;

That the total value of decedent's estate, including the ~~decedent's~~ interest in the above property was \$ 150,000, and that the value of the above property individually was \$ 140,000.

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 Delores J. Skipworth, 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.

John H. Skipworth (Seal)  
\_\_\_\_\_  
(Seal)

25-50

UNOFFICIAL COPY

Property of Cook County Clerk's Office

# UNOFFICIAL COPY

Subscribed and sworn to before me this 16 day of July, 19 96.

Catherine V. Keating  
Notary Public



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.

*This instrument was prepared by  
and mail, to:*

*Catherine V. Kaig  
42 Duxbury Ln.  
Cary, IL 60013*

96572179



Property of Cook County Clerk's Office

UNOFFICIAL COPY

Property of Cook County Clerk's Office

UNOFFICIAL COPY

STATE FILE NUMBER

STATE OF ILLINOIS  
MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 190  
REGISTERED NUMBER

DECEASED-NAME: Delores J. Skipworth  
 COUNTY OF DEATH: Cook  
 DATE OF DEATH: February 4, 1989  
 AGE LAST BIRTHDAY: 54  
 SEX: Female  
 MARRIAGE STATUS: Married  
 OCCUPATION: Homemaker  
 RESIDENCE: 1820 Kingston Lane, Schaumburg, IL 60193  
 FATHER: John Skipworth  
 MOTHER: XENO  
 RELATIONSHIP: 16  
 DEATH CAUSE: (a) BREAST CANCER  
 SIGNATURE: Elyse Lamgiase  
 DATE: 2/4/89  
 HOURS OF DEATH: 10:32 a.m.  
 DATE SIGNED: 2/4/89  
 ILLINOIS LICENSE NUMBER: 220 036-06 4462

I HEREBY CERTIFY THAT the foregoing is true and correct copy of the death record for the decedent 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 birth and deaths.

DATE: FEB 06 1989

SIGNED: *Madine McCarry*

At Cook County Dept of Public Health  
1500 S. Maybrook Drive - Maywood, Illinois 60154  
Official Title Deputy Registrar

UNOFFICIAL COPY

Property of Cook County Clerk's Office

865702179