

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS )  
COUNT OF COOK ) SS

256

George Otto being duly sworn states that he/she resides at 17965 Glen Oak, Lansing, Illinois in the City of Lansing Village

4P

The he/she was acquainted with Sandra Otto deceased, who at the time of his/her death, was one of the owners of the land in Cook County, Illinois, described as:

SEE LEGAL ON BACK SIDE

ATGF, INC

P.I.N. 30-31-103-017

Address of Property: 17965 Glen Oak, Lansing, IL 60438

That the deceased died 7/7/91, 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 unproved Will should be filed with the Clerk of the Probate Division of the Circuit 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 Cook 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 death of the deceased, does not exceed the sum of \$ \_\_\_\_\_.

Affiant makes this affidavit for that purpose of inducing any title insurance company to issue its title insurance policy, describing the above mentioned property.

See No Estate Tax Due Affidavit attached hereto and incorporated herein by reference.

Subscribed and sworn to before

me by the said 15 day of August, 1997

George R Otto (affiant's signature)

# UNOFFICIAL COPY

THIS INSTRUMENT WAS PREPARED BY:

William W. Winterhoff, Attorney at Law  
3344 RIDGE ROAD  
LANSING, IL 60438

MAIL TO:

William W. Winterhoff, + Associates LTD.  
3344 Ridge Road  
Lansing IL 60438.



LEGAL DESCRIPTION:

Property of Cook County Clerk's Office

LEGAL DESCRIPTION

LOT SEVENTEEN (17) IN BLOCK THREE (3) IN OAK GLEN GARDENS ADDITION, A SUBDIVISION OF CERTAIN LANDS, IN THE WEST HALF (1/2) OF THE NORTHWEST QUARTER (1/4) OF SECTION 31, TOWNSHIP 36 NORTH, RANGE 15, EAST OF THE THIRD PRINCIPAL MERIDIAN, BOUNDED BY A LINE DESCRIBED AS FOLLOWS: BEGINNING AT A POINT ON THE WEST LINE OF SAID SECTION WHICH POINT IS 330 FEET SOUTH OF NORTHWEST CORNER THEREOF, THENCE RUNNING SOUTH 0 DEGREES 0 MINUTES EAST ALONG SAID WEST LINE FOR A DISTANCE OF 1233.37 FEET; THENCE RUNNING SOUTH 89 DEGREES 50 MINUTES EAST FOR A DISTANCE OF 233.0 FEET THENCE RUNNING SOUTH 0 DEGREES 0 MINUTES EAST FOR A DISTANCE OF 256.8 FEET, THENCE RUNNING SOUTH 82 DEGREES 04 MINUTES EAST FOR A DISTANCE TO 436.55 FEET; THENCE RUNNING NORTH 0 DEGREES 03 MINUTES EAST FOR A DISTANCE OF 1550.8 FEET, THENCE RUNNING NORTH 89 DEGREES 56 MINUTES 30 SECONDS, WEST FOR A DISTANCE OF 666.3 FEET TO A POINT OF BEGINNING.

STATE OF ILLINOIS  
County of Cook,

DAVID D. ORR. County Clerk

I, DAVID D. ORR, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County, do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the County of Cook, at my office in the City of Chicago, in said County.

David D. Orr

STATE OF ILLINOIS

STATE FILE NUMBER

MEDICAL CERTIFICATE OF DEATH 91-012250

97654891

DECEASED'S BIRTH NO.		REGISTRATION DISTRICT NO. 16.32	REGISTERED NUMBER 102	
DECEASED NAME FIRST MIDDLE LAST		SEX		DATE OF DEATH MONTH DAY YEAR
SANDRA LEE OTTO		2.FEMALE		2.FEBRUARY 7, 1991
CITY OF DEATH		AGE - LAST BIRTHDAY (MM/DD)	UNDECEASED YEAR	UNDECEASED DAY
4. COOK		5a. 58	5b. 11	5c. 11
CITY, TOWN, TWP. OR ROAD DISTRICT NO.		HOSPITAL OR OTHER INSTITUTION - NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)		# YEARS OR PART, INDICATE G.O.A. OF BIRTH, AM. PATIENT (IF APPLICABLE)
6a. CHICAGO HEIGHTS		6b. ST. JAMES HOSPITAL		6c. D.O.A.
BIRTHPLACE (CITY AND STATE)		MARRIED BY EVER MARRIED, DIVORCED, ANNULLED, DIVORCED (SPECIFY)		WAS DECEASED EVER MARRIED OR COHABITING (YES/NO)
7. ILLINOIS		8b. GEORGE		9. NO
SOCIAL SECURITY NUMBER		KIND OF BUSINESS OR INDUSTRY		EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)
10. 36-44-3518		11a. SALESPERSON		11b. REAL ESTATE
RESIDENCE (STREET AND NUMBER)		CITY, TOWN, TWP. OR ROAD DISTRICT NO.		INSIDE CITY (YES/NO)
12a. 17965 GLEN OAK		12b. LANSING		12c. YES
STATE		AGE OF WHITE, BLACK, AMERICAN INDIAN, NATIVE HAWAIIAN, PART BLOOD		OF HISPANIC ORIGIN? (SPECIFY YES/NO)
13a. ILLINOIS		13b. 60/38		13c. WHITE
FATHER NAME FIRST MIDDLE LAST		MOTHER NAME FIRST MIDDLE (MARRIAGE) LAST		
14. JOSEPH SCOTT		15. DOROTHY DYKSTRA		
DECEASED'S NAME (FIRST MIDDLE LAST)		MARRIAGE ADDRESS (STREET AND NO. OR R.F.D. CITY OR TOWN STATE, ZIP)		
16. SANDRA LEE OTTO		17. 17965 GLEN OAK LANSING, IL. 60438		
IMMEDIATE CAUSE (Final disease or condition resulting in death)		CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST		PERIOD OF ILLNESS (IF KNOWN) (MONTHS)
(a) (b) (c)		(a) (b) (c)		16 MONTHS
PART II (Other signs, symptoms or conditions contributing to death but not resulting in the underlying cause given in PART I)		ALTOPIBY (Y/N)		WAS ALTOPIBY INDICALLY AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH (YES/NO)
		18. NO		19. NO
DATE OF OPERATION		MAJOR FINDINGS OF OPERATION		20. WAS THERE A PREGNANCY IN PAST 12 MONTHS?
20a.		20b.		20c. YES ( ) NO (X)
21a. (MONTH DAY YEAR) ATTEND THE DECEASED AND LAST SAW HIM ALIVE ON		21b. NO		21c. 8:15 PM
OCTOBER 10, 1990				22. FEBRUARY 8, 1991
22a. SIGNATURE		22b. NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT)		22c. ILLINOIS LICENSE NUMBER
EDWIN R. PRIEST, MD		5841 MARYLAND CHICAGO, ILLINOIS 60637		22d. 036-074236
23. EVERETT VOKES, MD				NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORNER OR MEDICAL EXAMINER MUST BE NOTIFIED.
FUNERAL, CREMATION, REMOVAL (BY PARTY)		CEMETERY OR CREMATORY - NAME		LOCATION CITY OR TOWN STATE
24a. BURIAL		24b. OAKRIDGE		24c. LANSING ILLINOIS
FUNERAL HOME		STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE ZIP		DATE (MONTH DAY YEAR)
25a. OTTO FUNERAL HOME		15801 S. COTTAGE CR. DOLTOI. ILLINOIS 60419		24d. FEB. 11, 1991
FUNERAL DIRECTOR'S SIGNATURE		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER		
25b. Jack M. Otto		25c. 6802		
LOCAL RECORDS CLERK'S SIGNATURE		DATE FILED (LOCAL REGISTRATION) (MONTH DAY YEAR)		
28a. John M. Costabile		FEBRUARY 9, 1991		

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