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5/07/00 02 001 Page 1 of 4
1999-07-23 12:14:32
Cook County Recorder 27.50



This document prepared by and
after recording return to:
Patricia M. Sack, Esq.
Levin & Funkhouser, Ltd.
55 West Monroe Street
Suite 2410
Chicago, Illinois 60603

DÉCEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS)
 SS.
COUNTY OF COOK)

Phyllis G. Ruttenberg, being duly sworn, states that she resides at 9337 Lincolnwood Drive, Skokie, Illinois 60203.

That she was married to Fred S. Ruttenberg, the deceased, who, at the time of his death, was one of the owners of the land in Cook County, Illinois, legally described in Exhibit A attached hereto and made a part hereof and commonly known as 9337 Lincolnwood Drive, Skokie IL ~~60052~~ (PIN: 10-14-214-044).
60203

That the deceased died on March 1, 1999, as evidenced by a copy of death certificate of the deceased attached hereto.

That the deceased died 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 July 6, 1999.

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

P.S.R.

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the deceased, does not exceed the sum of Five Hundred FiveThousand and No/100 Dollars (\$505,000.00).

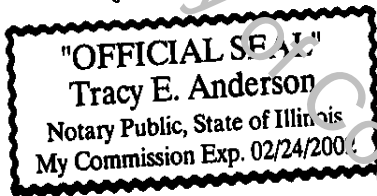
Phyllis G. Ruttenberg
Phyllis G. Ruttenberg

Subscribed and sworn to before me by the said

Phyllis G. Ruttenberg

this 13th day of July, A.D. 1999.

Tracy E. Anderson
Notary Public



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EXHIBIT A

Lot 183, 184 and Lot 185 (except the Northerly 26.52 feet) in Eugene L. Swenson's Evanston Manor a Subdivision of the North Half of Section 14, Township 41, North Range 13 East of the Third Principal Meridian, in Cook County, Illinois.

PIN # 10-14-214-044

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STATE FILE NUMBER

MEDICAL CERTIFICATE OF DEATH

STATE OF ILLINOIS

REGISTRATION DISTRICT NO. 16. 36
REGISTERED NUMBER 17361

DECEASED-NAME FIRST MIDDLE LAST
FRED RUTTENBERG 2. Male

DATE OF DEATH (MONTH, DAY, YEAR) 3. MARCH 1, 1999
DATE OF BIRTH (MONTH, DAY, YEAR) March 4, 1933

SEX 2. Male
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER 4. Cook
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER 5d. March 4, 1933

6a. Skokie
BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)
6b. Rush North Shore Medical Center
NAME OF SURVIVING SPOUSE (MARC/N/A/WIFE)

6c. Inpatient
WAS DECEASED WHILE IN ARMED FORCES? (YES/NO)

6d. Married
USUAL OCCUPATION
9. Yes

6e. Chicago, IL
SOCIAL SECURITY NUMBER
10. 344-24-9899

11a. Attorney
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER
11b. Law
INSIDE CITY (YES/NO)

12. 54
COUNTY 13d. Cook

13a. 9337 Lincolnwood
STATE ZIP CODE
13b. Skokie
RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY)

13c. Yes

14a. White
14b. No
14c. Yes

15. Maurice Ruttenberg
INFORMANT'S NAME (TYPE OR PRINT)

16. Bertha Greenwald
MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP)

17a. Phyllis Ruttenberg
17b. Wife
17c. 170337 Lincolnwood Skokie, IL 60203

18. PART I.
Enter the disease, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line.

(a) END STAGE HEPATIC CANCER
DUE TO, OR AS A CONSEQUENCE OF

(b) ARTERIAL HYPERTENSION
DUE TO, OR AS A CONSEQUENCE OF

(c) CIRRHOSIS
DUE TO, OR AS A CONSEQUENCE OF

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.
CORONARY ARTERY DISEASE / Atherosclerosis

19a. Autopsy (YES/NO)
19b. Were autopsy findings available prior to completion of cause of death? (YES/NO)

20a. Date of operation, if any
20b. Major findings of operation

20c. Yes/No
20d. Hours of death

21a. To the best of my knowledge, when did the cause(s) stated occur?
February 28, 1999

22a. Signature
22b. Name and address of certifier (TYPE OR PRINT)

22c. Philip Krause, M.D., 9669 N. Lawler, Skokie, IL 60077

23. Prasanna Sugathan, M.D.
NAME OF ATTENDING PHYSICIAN (IF OTHER THAN CERTIFIER)

24a. Burial
24b. Westlawn Cemetery
24c. Norridge, IL
24d. Westlawn Cemetery

25a. Lloyd Mandel Levayah Funerals, 4750 West Dempster Street, Skokie, IL 60076
FUNERAL DIRECTOR'S SIGNATURE

25b. Thomas M. Imiter
LOCAL REGISTRAR'S SIGNATURE

25c. 034-011888
DATE FILED BY LOCAL REGISTRAR (MONTH DAY YEAR)

25d. March 3, 1999
DATE (MONTH, DAY, YEAR)

26a. 99705767
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26b. MAR 03 1999
DATE

26c. James H. Huchbery
SIGNED

26d. DIRECTOR OF HEALTH
OFFICIAL TITLE

26e. SKOKIE
CITY OR TOWN

26f. I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named at item 1, and that this record was established and filed in my office in accordance with the provisions of the Illinois Vital Records Act.

26g. The original record of this death is permanently filed with the ILLINOIS DEPARTMENT OF PUBLIC HEALTH at Springfield, County clerk and local registrars are authorized to make certifications from copies of the original record. The Illinois statutes provide that the certification of a death record by the Department of Public Health, local registrar or county clerk shall be prime fact evidence in all courts and places of the facts therein stated.

26h. ILLINOIS DEPARTMENT OF PUBLIC HEALTH