

# UNOFFICIAL COPY

0 3 3 0 1 9 0 7

## AFFIDAVIT OF NO ESTATE TAX DUE

The Affiant, regarding the possible liability for State Inheritance Tax for the Estate of decedent herein, being first duly sworn upon oath, deposes and states as follows:

(1) I am LORETTA SKIELNIK, the surviving spouse  
(name and capacity)  
and reside at 15517 Ingleside, Dolton, Illinois.

(2) I am personally acquainted with the affairs of the Estate of \_\_\_\_\_  
LEONARD J. SKIELNIK, who died on May 4, 1984.

(3) That, based on the total value of the Estate of the deceased, I know that no Federal Estate Tax Return has been filed, is contemplated or is necessary.

(4) That, as a consequence, I represent to the Registrar of Titles that no Federal Estate Tax or State Inheritance Tax is due\*, and I make this affidavit for the purpose of inducing the Registrar of Titles of Cook County, Illinois, to issue a Certificate of Title without additional evidence of non-liability, relying on this statement as true, and in consideration thereof affiant guarantees the truth of the statements herein contained.

Loretta Skielnik

Subscribed and sworn to before

me this 20th day of March,

19 86.

Thomas F. Larkin  
Notary Public

\*Pursuant to H.B. 93, P.A. 82-1021

STATE OF ILLINOIS  
MEDICAL CERTIFICATE OF DEATH

FORM 101  
JANUARY 1984

REGISTRATION  
DISTRICT NO. 112-34  
REGISTERED  
NUMBER

DATED  
MAY 7 1984

SIGNED Mattie G. Johnson  
LOCAL REGISTRAR

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the person named therein and that this record was established and filed in my office in accordance with the provisions for the Illinois Statutes relating to the registration of births, stillbirths and deaths.

AT HARVEY, ILLINOIS.  
The original of this record is permanently filed with the Illinois Dept. of Public Health at Springfield. County Clerks and Local Registrars are authorized to make certifications from copies of the original record. The Illinois Statutes provide that the certifications of a death record by the Dept. of Public Health or the Local Registrar or the County Clerk shall be prima facie evidence in all courts and places of the facts therein stated.

1. REGISTERED NAME <u>Leonard J. Skelnik</u>		SEX <u>Male</u>		DATE OF BIRTH <u>May 4, 1924</u>	
2. RACE <u>White</u>		ETHNIC ORIGIN OR DESCENT <u>Polish</u>		PLACE OF BIRTH <u>Chicago, Ill.</u>	
3. CITY, TOWN, VILLAGE OR ROAD DISTRICT NUMBER <u>Harvey</u>		HOSPITAL OR OTHER INSTITUTION <u>Inalls Memorial Hospital</u>		DATE OF DEATH <u>May 22, 1984</u>	
4. STATE OF BIRTH <u>Illinois</u>		CITIZEN OF WHAT COUNTRY <u>U.S.A.</u>		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (CHECK ONE) <u>Never Married</u>	
5. SOCIAL SECURITY NUMBER <u>339-05-5813A</u>		USUAL OCCUPATION <u>Clerk</u>		KIND OF BUSINESS OR INDUSTRY <u>U.S. Steel</u>	
6. RESIDENCE STREET AND NUMBER <u>15517 Inpleside</u>		CITY, TOWN, VILLAGE OR ROAD DISTRICT NO. <u>Dolton</u>		COUNTY <u>Cook</u>	
7. FATHER'S NAME <u>Frank Skelnik</u>		MOTHER'S MARRIED NAME <u>Ann Skelnik</u>		STATE <u>Illinois</u>	
8. MEDICAL RECORDS <u>Medical Records Annette Kiplon</u>		RELATIONSHIP <u>None</u>		MAILING ADDRESS <u>One Inalls Dr. Harvey, IL 60426</u>	
9. PART I DEATH WAS CAUSED BY <u>Cardiopulmonary Arrest</u>		IMMEDIATE CAUSE <u>Cardiopulmonary Arrest</u>		HOURS <u>18 HOURS</u>	
10. PART II OTHER SIGNIFICANT CONDITIONS <u>Chronic Obstructive Pulmonary Disease</u>		DO NOT DO AS A CONTRIBUTOR OF <u>Ventricular Fibrillation</u>		DO NOT DO AS A CONTRIBUTOR OF <u>Arteriosclerotic Heart Disease</u>	
11. DATE OF OPERATION IF ANY MAJOR OPERATIONS OF OPERATION <u>None</u>		12. AUCI (AGE, SEX, RACE, ETHNIC ORIGIN, OCCUPATION, AND SOCIAL STATUS) <u>NO</u>		13. HOURS OF DEATH <u>2 P.M.</u>	
14. SIGNATURE OF PHYSICIAN <u>Jan Henry Fabisioff, M.D.</u>		15. NAME AND ADDRESS OF PHYSICIAN <u>71 West 15th Street, Harvey, IL</u>		16. PHYSICIAN LICENSE NUMBER <u>60226</u>	
17. SIGNATURE OF REGISTRAR <u>Mattie G. Johnson</u>		18. NAME OF REGISTRAR <u>Mattie G. Johnson</u>		19. REGISTRAR LICENSE NUMBER <u>36-57642</u>	
20. BURIAL INFORMATION <u>Burial</u>		21. CEMETERY OF DEPARTURE <u>Holy Cross</u>		22. LOCATION <u>Calumet City, Illinois</u>	
23. FUNERAL HOME <u>Thornridge 15801 S. Cottage Grove Ave. Dolton, Illinois 60419</u>		24. STREET AND NUMBER OF DEPT. <u>None</u>		25. CITY, STATE, ZIP <u>Harvey, Illinois 60426</u>	
26. FUNERAL DIRECTOR'S SIGNATURE <u>Thomas M. Oliver</u>		27. NAME OF FUNERAL HOME <u>Thornridge</u>		28. ADDRESS OF FUNERAL HOME <u>15801 S. Cottage Grove Ave. Dolton, Illinois 60419</u>	
29. LOCAL REGISTRAR'S SIGNATURE <u>Mattie G. Johnson</u>		30. NAME OF REGISTRAR <u>Mattie G. Johnson</u>		31. REGISTRAR LICENSE NUMBER <u>36-57642</u>	

VR200 REV. 5/82

Illinois Department of Public Health - Office of Vital Records

BASED ON 1984 U.S. STANDARD CERTIFICATE

DCS 16d SA 5.47 (FORM 302)

*[Handwritten Signature]*

**Affidavit by Surviving Joint Tenant**

L. R. ....

Doc. No. 1856387-F

Certificate No. 1284359

State of ILLINOIS }  
County of COOK }

ss.

LORETTA SKELNIK

*Widow*

..... being first  
duly sworn, upon oath deposes and says:

That *she* resides at 15517 Ingleside in the City of Dolton

and that *she* is one of the parties who took title, not in tenancy in common, but in joint tenancy,

to real estate shown in Certificate of Title No. 1284359 situated in said Cook County, Illinois,

described as follows: Lot Ten (10), In Block One (1) in Blouin Bros. Almar Meadows Subdivision, of Lot Seven (7) (except the South Thirty and seventy-nine hundredths (30.79) acres) and Lot One (1) (except the South Sixty (60) feet thereof) in Bergers Subdivision of Lot Seven (7) (except the North Ten (10) acres) in Bergers Subdivision in the West Half (1/2) of Section 14, and of the North Eighteen and two hundred forty-two thousandths (18.242) acres (except the East (60) feet thereof) of Lot Six (6) in the partition of the West Half (1/2) of Section 14, all in Township 36 North, Range 14, East of the Third Principal Meridian, Cook County, Illinois, according to Plat thereof registered in the Office of the Registrar of Titles of Cook County, Illinois, on May 27, 1955, as Document Number 1597673.

*15517 Ingleside Dolton*

Affiant states that LEONARD J. SKELNIK one of the said owners in joint

tenancy, died intestate in the city (Village) of Harvey in the State of Illinois

as is confirmed by a Certificate of the health department of said municipality hereto attached.

Affiant states that the remaining joint tenant has not changed her marital status since

the issuance of Certificate of Title Number 1284359 (except who

has been married but once since acquiring said real estate and then to .....

Further, that the affiant makes this affidavit for the purpose of inducing the Registrar of Titles of Cook County, Illinois, to issue a certificate of title to the surviving Joint Tenant to said above described premises, relying on this statement as true, and in consideration thereof affiant guarantees the truth of the statements herein contained.

*Loretta Skelnik*

Subscribed and sworn to before me

this 26th day of March 19 86

*[Handwritten Signature]*  
NOTARY PUBLIC

3504207

UNOFFICIAL COPY

3201505

Property of Cook County Clerks Office

1384359  
TJED

3504207  
3504207  
3504207

3504207

IDENTIFIED  
No.  
Register of Deeds  
HARRY BUS-VORRELL  
SAFECCO

SAFECCO TITLE INSURANCE CO.  
2 N. LA SALLE ST.  
SUITE 1700  
CHICAGO, IL. 60608

MT 199 30 / MHWB 3201505