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AFFIDAVIT OF NO ESTATE TAX: BUD 7 0 0 0

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 HOWARD ROSENFELD
(name and capacity)

and reside at 221 N. LaSalle St - Chgo

(2) I am personally acquainted with the affairs of the Estate of WILLIAM LITVIN, who died on 12-16-85.

(3) That as a consequence, I represent to the Registrar of Titles that regarding Federal Estate Tax or State Inheritance Tax;
(elect one - initial choice)

- 1) that no Tax is due; or _____
 2) that if any Tax due, there are sufficient other assets to pay such Tax, or _____
 3) that any Tax due has been paid. _____

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.

Howard Rosenfeld

Subscribed and sworn to before
me this 10 day of April;
19 80.

Edwin Adhage
Notary Public

STATE FILE NUMBER

STATE OF ILLINOIS

MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 16.0
 REGISTERED NUMBER

1. DECEASED—NAME William Leo Horn		2. SEX Male		3. DATE OF DEATH December 16, 1985	
4. RACE White		5. AGE 75		6. DATE OF BIRTH (MO., DAY, YEAR) March 18, 1910	
7. HOFFMAN ESTATES		8. HOSPITAL OR OTHER INSTITUTION Humana Hospital		7a. COOK	
9. U.S.A.		10. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)		11. DOROTHY KATHLEEN PELKA	
12. 550-09-5739		13. Inspector (Naval) Federal Govt.		13a. none	
14. 205 Villa Road		14a. Streamwood		14b. Illinois	
15. William Horn		15a. Streamwood		15b. Illinois	
17. PATRICIA DALE		17a. Roads		17b. Fick	
18. DEATH WAS CAUSED BY: Cardiac Arrest		18a. [Enter only one cause per line for (a), (b), and (c)]		18b. [Enter only one cause per line for (d), (e), and (f)]	
19. [Enter only one cause per line for (d), (e), and (f)]		20. [Enter only one cause per line for (d), (e), and (f)]		20a. [Enter only one cause per line for (d), (e), and (f)]	
21. [Enter only one cause per line for (d), (e), and (f)]		21a. [Enter only one cause per line for (d), (e), and (f)]		21b. [Enter only one cause per line for (d), (e), and (f)]	
22. SIGNATURE Philip A. LaSpina		22a. [Enter only one cause per line for (d), (e), and (f)]		22b. [Enter only one cause per line for (d), (e), and (f)]	
23. Philip A. LaSpina		23a. [Enter only one cause per line for (d), (e), and (f)]		23b. [Enter only one cause per line for (d), (e), and (f)]	
24. [Enter only one cause per line for (d), (e), and (f)]		24a. [Enter only one cause per line for (d), (e), and (f)]		24b. [Enter only one cause per line for (d), (e), and (f)]	
25. [Enter only one cause per line for (d), (e), and (f)]		25a. [Enter only one cause per line for (d), (e), and (f)]		25b. [Enter only one cause per line for (d), (e), and (f)]	
26. [Enter only one cause per line for (d), (e), and (f)]		26a. [Enter only one cause per line for (d), (e), and (f)]		26b. [Enter only one cause per line for (d), (e), and (f)]	

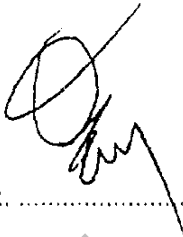
I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named in Item 1 and that this record was established and filed in my office in accordance with the provisions of the Illinois statutes relating to the registration of births, stillbirths and deaths.

Date December 18, 1985 Signed Angela Augustin
 at Cook County Department of Public Health
 1500 S. Maybrook Drive, Maywood, IL 60153
 Official Title, Chief Deputy Registrar

ILLINOIS Department of Public Health - Office of Vital Records (BASED ON 1978 U.S. STANDARD CERTIFICATE)
 FUNERAL HOME: Barron-Hall Funeral Home, Inc., 4332 N. Elston Avenue Chicago, Illinois 60641
 LOCAL REGISTRAR'S SIGNATURE: Angela Augustin
 REGISTERAR: Angela Augustin
 DATE RECORDED BY LOCAL REGISTRAR (MONTH, DAY, YEAR): December 18, 1985
 FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER: 5418

3507000

(FORM 302)



Affidavit by Surviving Joint Tenant

L. R. Doc. No. Certificate No. 1199820

State of Illinois }
County of Cook } ss.

DOROTHY K. HORN being first

duly sworn, upon oath deposes and says:

That she resides at 205 Villa Road in the City of Streamwood 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. 1199820 situated in said Cook County, Illinois, described as follows:

Lot 1669 in Woodland Heights Unit Four, being a Subdivision in Sections 23 and 24, Township 41 North, Range 9, East of the Third Principal Meridian, according to Plat thereof registered in the Office of the Registrar of Titles of Cook County, Illinois, on July 14, 1960, as Document Number 1931799.

PIN: 06-23-216-012 ADD: 205 VILLA RD STREAMWOOD, IL

Affiant states that William L. Horn one of the said owners in joint tenancy, died intestate, in the city (Village) of Hoffman, 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 1199820 (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.

Dorothy K Horn

Subscribed and sworn to before me this 9 day of April 1986

Edwin [Signature]
NOTARY PUBLIC

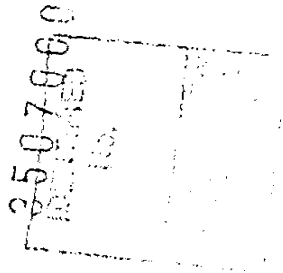
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REGISTRAR OF TITLES



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