

Elsie

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 ELSIE ENGELKING
(name and capacity)

and reside at Maple Hill Nursing Home, Box 2308 RFD, Long Grove, Illinois.

(2) I am personally acquainted with the affairs of the Estate of PHILIP ENGELKING, who died on October 23, 1984.

(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)

- XX 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.

Elsie Engelking
ELSIE ENGELKING

Subscribed and sworn to before me this 21 day of April; 1986.

C. W. Skov
Notary Public

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0 3 5 0 9 3 7 3

LEGAL DESCRIPTION

THE SOUTH 50 FEET OF THE NORTH 100 FEET (MEASURED ALONG THE WEST LINE) (EXCEPT THE EAST 0.65 FEET OF THE SOUTH 25 FEET THEREOF) OF LOT NINE (9) IN FLENTLE'S SURDIVISION OF PART OF THE EAST HALF (1/2) OF THE NORTH 30 ACRES OF THE WEST HALF (1/2) OF THE NORTH WEST QUARTER (1/4) OF SECTION 32, TOWNSHIP 42 NORTH, RANGE 11, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, ACCORDING TO THE PLAT THEREOF, RECORDED SEPTEMBER 8, 1890 AS DOCUMENT NO. 1332337 IN BOOK 46 OF PLATS, PAGE 36.

PERMANENT INDEX NUMBER: 04-32-102-010 *M*

COMMONLY KNOWN AS: 201 SOUTH DIXTON, ARLINGTON HEIGHTS, ILLINOIS.

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At Cook County Department of Public Health Official Title Chief Deputy Registrar

Date

NOV 7 1981 6 0 5 3 0

Signed

Madame McCurdy

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.

REGISTRATION NO. 16.0
REGISTERED NUMBER

STATE OF ILLINOIS 07953
MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER

1. Phillip H. Engelking SEX Male DATE OF BIRTH 2 24 1909 MONTH, DAY, YEAR October 23, 1909

FATHER—NAME Engelking MARRIED, NEVER MARRIED, DIVORCED, WIDOWED, OR OTHER Widowed NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) Elsie Engelm

MOTHER—NAME Engelking MARRIED, NEVER MARRIED, DIVORCED, WIDOWED, OR OTHER Widowed NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) Elsie Engelm

2. Arlington Heights CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER Northwest Community Hospital HOSPITAL OR OTHER INSTITUTION Arlington Heights COUNTY OF DEATH Cook

3. Illinois STATE OF BIRTH Illinois CITIZEN OF WHAT COUNTRY United States MARRIED, NEVER MARRIED, DIVORCED, WIDOWED, OR OTHER Widowed NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) Elsie Engelm

4. 243 03 9520 SOCIAL SECURITY NUMBER 201 South Dunton RESIDENCE STREET AND NUMBER Arlington Heights CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER Cook COUNTY OF DEATH Illinois

5. Engelking FATHER—NAME Engelking MARRIED, NEVER MARRIED, DIVORCED, WIDOWED, OR OTHER Widowed NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) Elsie Engelm

6. Elsie Engelking INFORMANT NAME (TYPE OR PRINT) Wife RELATIONSHIP Wife MAILING ADDRESS (STREET AND NO. OR R. F. D., CITY OR TOWN, STATE, ZIP) 17201 S Dunton Arlington Hts, Ill

7. Acute Myocardial Infarction DEATH WAS CAUSED BY Coronary Artery Disease

8. 1981 DATE OF OPERATION, IF ANY 10-16-81 MAJOR FINDINGS OF OPERATION Acute Myocardial Infarction

9. 10-16-81 (MONTH, DAY, YEAR) DATE OF OPERATION 10-25-81 (MONTH, DAY, YEAR) DATE OF DEATH

10. Dr. Frank Carter NAME AND ADDRESS OF PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT) 1009 S Evergreen Arlington Hts, Ill

11. Dr. Frank Carter NAME AND ADDRESS OF PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT) 1009 S Evergreen Arlington Hts, Ill

12. Funeral Home NAME OF CEMETERY OR CREMATORY Memory Gardens LOCATION Arlington Heights, Ill CITY OR TOWN

13. Funeral Home NAME OF CEMETERY OR CREMATORY Memory Gardens LOCATION Arlington Heights, Ill CITY OR TOWN

14. Funeral Home NAME OF CEMETERY OR CREMATORY Memory Gardens LOCATION Arlington Heights, Ill CITY OR TOWN

15. Funeral Home NAME OF CEMETERY OR CREMATORY Memory Gardens LOCATION Arlington Heights, Ill CITY OR TOWN

ILLINOIS DEPARTMENT OF PUBLIC HEALTH - OFFICE OF VITAL RECORDS (BASED ON 1978 U.S. STANDARD CERTIFICATE)

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DCS 164 (FORM 302)

[Handwritten signature]

Affidavit by Surviving Joint Tenant

L. R. Doc. No. Certificate No. 375805

State of ILLINOIS }
County of LAKE } ss.

ELSIE ENGELKING being first
duly sworn, upon oath deposes and says:

That she resides at Maple Hill Nursing Home in the City of Long Grove
Ex 2308 RFD
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. 375805 situated in said Cook County, Illinois,
described as follows:

SEE LEGAL DESCRIPTION ATTACHED

Affiant states that PHILIP ENGELKING one of the said owners in joint
tenancy, died intestate, in the city (Village) of Arlington Heights 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 375805 (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.

Elsie Engelking
ELSIE ENGELKING

Subscribed and sworn to before me
this 21 day of April, 1976

[Handwritten signature]
NOTARY PUBLIC.

130 S. MONTGOMERY HWY.
LIBERTYVILLE ILL 62250

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Joint Tenant by Surviving Joint Tenant

Certificate No. _____

County of _____

being first _____

in the City of _____

located in said Cook County, Illinois

one of the said owners in joint _____

the health department of said municipality herein attached.

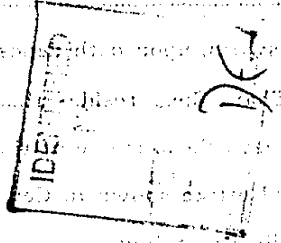
for the purpose of inducing the Registrar of Titles _____

to said above _____

APR 11

PM '86

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LIBERTY TITLE INS. CO.
190 S. Northwest Hwy.
Palatine, Ill. 60067

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