

**UNOFFICIAL COPY**  
AFFIDAVIT OF NO ESTATE TAX DUE

0 3 5 2 0 4 6 1

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 Albert J. Otto  
(name and capacity)

and reside at 6119 Berenice Ave. Chgo., IL

(2) I am personally acquainted with the affairs of the Estate of Marquette E. Otto, who died on 4-24-84.

(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)

ATOX 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.

X Albert J. Otto  
Albert J. Otto.

Subscribed and sworn to before me this 30th day of May, 19 86.

Christine M. Robinson  
Notary Public  
My Commission Expires 11-17-87

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

STATE OF ILLINOIS  
**MEDICAL CERTIFICATE OF DEATH**  
 NUMBER **608348**

April 25, 1984

REGISTRATION NO. **1610**  
 REGISTERED NUMBER  
 DECEASED NAME **MARGUERITE E. OTTO**  
 SEX **FEMALE**  
 DATE OF BIRTH **MAY 19, 1908**  
 COUNTY OF DEATH **COOK**  
 DATE OF DEATH **APRIL 24, 1984**  
 MONTH, DAY, YEAR

**Chicago**  
 CITY, TOWNSHIP, OR ROAD DISTRICT NUMBER  
 RESIDENTIAL OR OTHER HOSPITAL  
**NORTHWEST HOSPITAL**  
 NAME OF SURVIVING SPOUSE (MARRIAGE DATE)  
**Albert J. Otto**  
 WAS DECEASED EVER IN U.S. WAR OR NAVAL SERVICE?  
**NO**

**Illinois**  
 CITIZEN OF WHAT COUNTRY  
**U.S.A.**  
 MARRIED, DIVORCED (SEPERATELY)  
**Married**  
 NAME OF SURVIVING SPOUSE (MARRIAGE DATE)  
**Albert J. Otto**  
 WAS DECEASED EVER IN U.S. WAR OR NAVAL SERVICE?  
**NO**

**6119 BERENICE**  
 RESIDENT STREET AND NUMBER  
**Housewife**  
 KIND OF BUSINESS OR INDUSTRY  
**Own Home**  
 NAME OF SURVIVING SPOUSE (MARRIAGE DATE)  
**Albert J. Otto**  
 WAS DECEASED EVER IN U.S. WAR OR NAVAL SERVICE?  
**NO**

**Edward**  
 FATHER NAME  
**Hartigan**  
 MOTHER NAME  
**Lillian**  
**English**  
 LANGUAGE

**DEATH WAS CAUSED BY:**  
 (1) **CARDIO-PULMONARY ARREST**  
 (2) **ACUTE LIVER INSUFFICIENCY**  
 (3) **ACUTE KIDNEY INSUFFICIENCY**

**DATE OF OPERATION, IF ANY**  
**MAJOR FINDINGS OF OPERATION**  
**CHRONIC LIVER CIRRHOSIS WITH ASCITES**

**DR. ZBIGNIEW DZIEDZIECH**  
 NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER  
**2716 N. CENTRAL CHGO., ILL. 60634**  
 ILLINOIS LICENSE NUMBER **224336-45539**

**Thomas A. Gibbons**  
 LOCAL REGISTRAR'S SIGNATURE  
**James L. Williams**  
 LOCAL REGISTRAR'S SIGNATURE  
**Edward D. Edwards, M.D., M.P.A.**  
 LOCAL REGISTRAR'S SIGNATURE  
**APR 25 1984**  
 DATE REC'D BY LOCAL REGISTRAR

STATE OF ILLINOIS  
 COUNTY OF COOK  
 CITY OF CHICAGO  
 SS

I, **LOWME C. EDWARDS M.D. M.P.A.**, LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILLBIRTHS AND DEATHS OF THE CITY OF CHICAGO BY VIRTUE OF THE LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO. THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY AS A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES.

**Edward D. Edwards, M.D., M.P.A.**  
 LOCAL REGISTRAR

THIS CERTIFIED COPY VALID WHEN MULTICOLOR SEAL AND BLUS SIGNATURE ARE AFFIXED

3520461

(FORM 302)

P.F.N. # 13-20-111-013-0000

CIK/A 6119 BERENICE AVE.

Affidavit by Surviving Joint Tenant

L. R. 10720 Doc. No. 1222923 Certificate No. 531253

State of Illinois }
County of Cook } ss.

Albert J. Otto

being first

duly sworn, upon oath deposes and says:

That he resides at 6119 Berenice Ave. in the City of Chicago
and that he 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. 531253 situated in said Cook County, Illinois,

described as follows: In Albert J. Schorsch Irving Park Boulevard
Gardens First Addition, a Resubdivision of Schorsch Bros.
Irving Park Boulevard Gardens, a Subdivision of the East Half (1/2)
of the West Half (1/2) of the East Half (1/2) of the North
Half (1/2) of the Northwest Quarter (1/4) (except the North 165
feet thereof of Section 20, Town 4 North, Range 13, East of the
Third Principal Meridian.

Affiant states that Marguerite E. Otto one of the said owners in joint
tenancy, died intestate, in the city (Village) of Chicago 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 his marital status since
the issuance of Certificate of Title Number 531253 (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.

X Albert J. Otto
Albert J. Otto

Subscribed and sworn to before me
this 30th day of May 1986.

Christine M. Faberson
NOTARY PUBLIC.

My Commission Expires 11-17-87

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1/25/23  
6/5/23  
NED

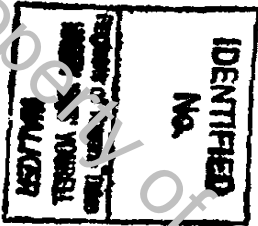
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REGISTERED MAIL

JUN 5 12 55 PM '06



Property of Cook County Clerk's Office

**NORTHWEST NATIONAL BANK**  
3985 MILWAUKEE AVENUE  
CHICAGO, ILLINOIS 60611

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