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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 ANTHONY R. LAURIE, spouse and surviving joint tenant,
(name and capacity)

and reside at 512 Creighton Lane, Schaumburg, Illinois

(2) I am personally acquainted with the affairs of the Estate of MARY LAURIE, Deceased, who died on July 18, 1986.

(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)

X 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.

Anthony R. Laurie

Subscribed and sworn to before

me this 2nd day of March,

19 87

Murray Ruben
Notary Public

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[Faint, illegible text from a document, possibly a contract or legal notice, is visible in the background.]

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IDENTIFIER'S BIRTH NO. _____ STATE OF ILLINOIS STATE FILE NUMBER _____

REGISTRATION DISTRICT NO. 16.0E

REGISTERED NUMBER _____

MEDICAL CERTIFICATE OF DEATH

DECEASED

1. **DECEASED—NAME** FIRST MIDDLE LAST SEX DATE OF DEATH (MONTH, DAY, YEAR)

1. Mary Laurie 2 Female 3. July 18, 1986

RACE—WHITE, BLACK, AMERICAN ORIGIN OR DESCENT (INDIAN, ETC.) (SPECIFY) AGE—LAST BIRTHDAY (YRS.) UNDER YEAR UNDER DAY (MOS., DAYS, HOURS, MIN.) DATE OF BIRTH (MO., DAY, YEAR) COUNTY OF DEATH

4a. White 4b. no American 5a. 37 5b. _____ 5c. _____ 6. March 27, 1949 7a. Cook

CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) IF HOSP. OR INST. INDICATE DOA OR I.P. (SPECIFY AM. INPATIENT)

7b. Hoffman Estates 7c. Humana Hospital 7d. DOA

STATE OF BIRTH (IF NOT IN U.S.A. NAME COUNTRY) CITIZEN OF WHAT COUNTRY MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)

8. Illinois 9. USA 10. Married 11. Tony Laurie

SOCIAL SECURITY NUMBER USUAL OCCUPATION KIND OF BUSINESS OR INDUSTRY WAS DECEASED EVER IN U.S. ARMED FORCES? (SPECIFY YES OR NO) WAR OR DATES OF SERVICE

12. 341-62-1775 13a. Housewife 13b. At Home 13c. NO 13d. None

RESIDENCE—STREET AND NUMBER CITY, TOWN, TWP. OR ROAD DISTRICT NO. (INSIDE CITY YES/NO) COUNTY STATE

14a. 512 Creighton Lane 14b. Schaumburg 14c. Yes 14d. Cook 14e. Illinois

PARENTS

15. **FATHER—NAME** FIRST MIDDLE LAST **MOTHER—MAIDEN NAME** FIRST MIDDLE LAST

15. Joseph V. Benso 16. Jean M. Molezzi

INFORMANT NAME (TYPE OR PRINT) RELATIONSHIP MAILING ADDRESS (STREET AND NO. OR R. F. D., CITY OR TOWN, STATE, ZIP)

17a. Tony Laurie 17b. Husband 17c. 512 Creighton Lane, Schaumburg, Illinois 60193

CAUSE

18. **DEATH WAS CAUSED BY:** (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))

PART I. IMMEDIATE CAUSE

(a) RESPIRATORY FAILURE 2 days

CONDITIONS, IF ANY, WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.

(b) PREAST CANCER 7 years

(c) _____

PART II. OTHER SIGNIFICANT CONDITIONS; CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)

19a. NO 19b. none

AUTOPSY (YES/NO) IF YES, WERE FINDINGS CONSIDERED IN DETERMINING CAUSE OF DEATH?

20a. DATE OF OPERATION, IF ANY 20b. MAJOR FINDINGS OF OPERATION

20c. NO 20d. NO

CERTIFIER

21. (1) DID (1) DID NOT ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON (MONTH, DAY, YEAR) WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (SPECIFY YES OR NO) HOUR OF DEATH

21a. 7/13/86 21c. Yes 21e. 12:02 AM

TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.

22a. SIGNATURE R. Michael Williams 22b. July 18, 1986

NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) ILLINOIS LICENSE NUMBER

22c. R. Michael Williams 22d. 036 059690

1 American Plaza Evanston, Illinois

23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT) NOTE: IN ALL INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.

DISPOSITION

24. BURIAL, CREMATION, REMOVAL (SPECIFY) CEMETERY OR CREMATORY—NAME LOCATION CITY OR TOWN STATE DATE (MONTH, DAY, YEAR)

24a. Burial 24b. St. Michael 24c. Palatine Illinois 24d. July 21, 1986

FUNERAL HOME NAME STREET AND NUMBER OR R. F. D. CITY OR TOWN STATE ZIP

25a. Ahlgrim & Sons, Ltd. 330 W. Golf Rd. Schaumburg, Illinois 60195

FUNERAL DIRECTOR'S SIGNATURE FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER

25b. Robert W. Ahlgrim 25c. 6270

LOCAL REGISTRAR'S SIGNATURE DATE RECD. BY LOCAL REGISTRAR (MONTH, DAY, YEAR)

26a. RENE L. SCOTT, M.D. 26b. July 21 1986

REGISTRAR

VR 200 REV. 5/82 Illinois Department of Public Health - Office of Vital Records (BASED ON 1978 U.S. STANDARD CERTIFICATE)

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 statutes relating to registration of births, stillbirths and deaths.

DATE July 21, 1986 SIGNED Orish-Bel

Barbenister, Illinois. OFFICIAL TITLE Sub-Registrar

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(FORM 302)

Affidavit by Surviving Joint Tenant

L. R. (1) 8327 (2) 27948 Doc. No. Certificate No. 1225031

State of ILLINOIS
County of COOK ss.

[Handwritten signature]

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

That he resides at 512 Creighton Lane in the City of Schaumburg,
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. 1225031 situated in said Cook County, Illinois,
described as follows:

Lot One Thousand Seven Hundred Eighteen in Lancer Subdivision Unit No.
17, being a Subdivision in the Northeast (Quarter) 1/4 of Section 27,
Township 4, North, Range 10, East of the Third Principal Meridian,
according to the plat thereof registered by the Office of the Registrar
of Titles of Cook County, Illinois on May 29, 1973 as Document # 2694243.

512 Creighton Lane Schaumburg, Ill 13E0
Affiant states that MARY LAURIE one of the said owners in joint

tenancy, died intestate, in the City (Village) of Schaumburg 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 1225031 (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.

[Handwritten signature: Anthony Laurie]

Subscribed and sworn to before me
this 2nd day of March, 1987.

[Handwritten signature: Murrel Ruben]
NOTARY PUBLIC.

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Property of Cook County

210
1225031

1997 MAR -5 PM 3:55
HARRY J. PUGLIONE, CLERK
REGISTER OF DEEDS

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IDENTIFIED No.	Register of Deeds Titles HARRY J. PUGLIONE SANCHEZ
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PESTINE & NEUMAN
555 SKOKIE BOULEVARD
NORTHBROOK, ILL.
60062