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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 DAVID I. JOHNSON (Husband)
(name and capacity)

and reside at 4060 Ridgeland Lane, Northbrook, Illinois 60062

(2) I am personally acquainted with the affairs of the Estate of JACQUELINE M. JOHNSON, who died on July 28, 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)

- 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.

David I. Johnson

DAVID I. JOHNSON

Subscribed and sworn to before me this 20th day of APRIL; 19 87

Heidi L. McCoy
Notary Public

STATE FILE NUMBER

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 16-0
REGISTERED NUMBER
DECEASED—NAME

FIRST MIDDLE LAST
JACQUELINE M JOHNSON
SEX FEMALE
DATE OF DEATH JULY 28, 1986
AGE (MONTHS, DAYS, YEARS)
DATE OF BIRTH (MO., DAY, YEAR) JULY 28, 1930
COUNTY OF DEATH COOK
RACE (WHITE, BLACK, AMERICAN INDIAN, ETC.) (SPECIFY) FRENCH
USUAL OCCUPATION HOUSEWIFE
HOSPITAL OR OTHER INSTITUTION LUTHERAN GENERAL HOSPITAL
CITY, TOWN, VILLAGE, OR ROAD DISTRICT NUMBER PARK RIDGE
STATE OF RESIDENCE (IF NOT U.S.A.) ILLINOIS
CITIZENSHIP (NATURALIZED, NATURAL, ALIEN)
9. UNITED STATES
MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)
10. MARRIED
NAME OF SURVIVING SPOUSE (LAST, FIRST, MIDDLE, NAME, IF WIFE) DAVID JOHNSON
SOCIAL SECURITY NUMBER 321-22-9005
KIND OF BUSINESS OR INDUSTRY OWN HOME
13. HOUSEWIFE
RESIDENCE STREET AND NUMBER 4060 RIDGELAND AVE
CITY, TOWN, VILLAGE, OR ROAD DISTRICT NUMBER NORTHBROOK
INSIDE CITY YES
14. YES
STATE ILLINOIS
FATHER—NAME (LAST, FIRST, MIDDLE) ROBERT PROST
MOTHER—MAIDEN NAME (LAST, FIRST, MIDDLE) MINNIE LAWSON
INFORMANT NAME (TYPE OR PRINT) RELATIONSHIP KRAWCZYK/REGISTRAR 17b REC
MAILING ADDRESS 1775 W DEMPSTER, PARK RIDGE, IL, 60068
DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))
IMMEDIATE CAUSE (b) MASSIVE INTRA-ABDOMINAL HEMORRHAGE 1 hour
(c) PORTAL HYPERTENSION AND CIRRHOSIS > 3 years
3 1/2 WEEKS
LEFT LOWER LOBE PNEUMONIA
DATE OF OPERATION, IF ANY MAJOR FINDINGS OF OPERATION
7-3-86 & 7-28-86 AS ABOVE (a) (b) (c)
HOURS (MONTH, DAY, YEAR) 7-28-86
WAS CORNER OR MEDICAL EXAMINER (YES OR NO) YES
21b. YES
21c. YES
IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? NO
21c. YES NO

PART II. OTHER SIGNIFICANT CONDITIONS: CONTRIBUTING TO OR NOT RELATED TO CAUSE GIVEN IN PART I (a)
LEFT LOWER LOBE PNEUMONIA
DATE OF OPERATION, IF ANY MAJOR FINDINGS OF OPERATION
7-3-86 & 7-28-86 AS ABOVE (a) (b) (c)
HOURS (MONTH, DAY, YEAR) 7-28-86
WAS CORNER OR MEDICAL EXAMINER (YES OR NO) YES
21b. YES
21c. YES
IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? NO
21c. YES NO

22a. SIGNATURE (TYPE OR PRINT) DATE SIGNED (MO., DAY, YEAR)
NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) JOHN D. MCKENZIE, M.D., 1875 DEMPSTER, PARK RIDGE, ILL. 60062
ILLINOIS LICENSE NUMBER 36-58544
22c. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)
HOWARD ROSENBLATE, M.D.
23. COUNTY OR CREMATORY—NAME LOCATION CITY OR TOWN STATE DATE (MONTH, DAY, YEAR)
24a. Cremation 24b. Montrose 24c. Chicago, Illinois 24d. July 30, 1986
FUNERAL HOME NAME STREET AND NUMBER OR R. F. D. CITY OR TOWN STATE ZIP
25a. HANCKAMP FUNERAL HOME 385 Waukegan Rd. Northbrook, Illinois 60062
FUNERAL DIRECTOR'S SIGNATURE SIGNATURE FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER
25b. Jack R. Kynion 7230
LOCAL REGISTRAR'S SIGNATURE DATE REC'D. BY LOCAL REGISTRAR (MONTH, DAY, YEAR)
26a. Angela Augustin July 30, 1986
26b. REGISTRAR'S SIGNATURE DATE REC'D. BY REGISTRAR (MONTH, DAY, YEAR)
26c. REGISTRAR'S SIGNATURE DATE REC'D. BY REGISTRAR (MONTH, DAY, YEAR)
VR 200 REV. 5/82

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 July 30, 1986
at Cook County Department of Public Health
Signed Angela Augustin
Official Title, Chief Deputy Registrar

M. J. C.

3611656

(FORM 302)

Affidavit by Surviving Joint Tenant

L. R. 17973 Doc. No. 193177-F Certificate No. 918618

State of Illinois }
County of Cook } ss.

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

That he resides at 4060 Ridgeland Lane in the ^{Village} ~~City~~ of Northbrook, Illinois
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. 918618 situated in said Cook County, Illinois,
described as follows:

LOT SEVEN (7) in Ridgeland Subdivision, being a Subdivision of part of the South-
west Quarter (¼) of Section 7, Township 42 North, Range 12, East of the Third
Principal Meridian, in Cook County, Illinois.

PTN: 04-07-301-021 FBO J
Common address: 4060 Ridgeland Ln, Northbrook, IL 60062

Affiant states that JACQUELINE M. JOHNSON, one of the said owners in joint
tenancy, died intestate, in the city (Village) of Park Ridge 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 918618 (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.

David I. Johnson
DAVID I. JOHNSON

Subscribed and sworn to before me
this 21st day of APRIL 1987.

John E. McCoy
NOTARY PUBLIC.

Joseph C. Johnson
1205 Shermer
Northbrook, IL 60062

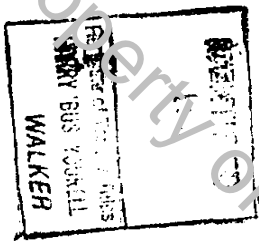
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Joseph E. Johnson
1225 Sherman
Northbrook, IL 60062

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