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PROPERTY CLERK'S OFFICE  
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4-3-90W

09-870651

DOCUMENT NO. 537821  
DATE OF SEARCH: 5/3/89

STATUTORY FEDERAL TAX LIEN SEARCH

PRESENT PARTIES IN INTEREST:

*P/Bart Biederick*

*Priscilla Biederick*

RESULT OF SEARCH:

*None*

INTENDED GRANTEE OR ASSIGNEE:

*Priscilla Biederick*

*None*

RESULT OF SEARCH:

*None*

4-3-90W

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SBH08-004 State Form 10110 (R2/3-89) DATA CENTER 1

14g DATE PRONOUNCED DEAD (MAY BE BLANK) (Type in full) (If you specify street, address, apartment no.)

34g MANNER OF DEATH	34e DATE OF INJURY (Month, Day, Year)	34f TIME OF INJURY (Year or mo)	34g DESCRIBE HOW INJURY OCCURRED
<input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Accidents <input type="checkbox"/> Pending investigation <input type="checkbox"/> Unknown	34d PLACE OF INJURY - All home, farm, street, factory, office, building, etc. (Specify)	34i LOCATION (Street and Number or Rural Route Number, City or Town, State)	

USE ONLY CORONER HEALTH OFFICER

31 HEALTH OFFICER'S SIGNATURE	32 NAME AND ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH ITEM 29 (Type/print)
<i>Robert Smoltz</i>	ROBERT SMOLTZ 110 RIDGE ROAD MUNSTER, INDIANA 46321

CERTIFIER

29g SIGNATURE AND TITLE OF CERTIFIER	29f MEDICAL LICENSE NO.	29e DATE SIGNED (Month, Day, Year)
<i>William J. ...</i>	29277	JANUARY 13 1990

29c CERTIFIER (Check only one)

CERTIFYING PHYSICIAN To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) as stated.

HEALTH OFFICER On the basis of examination and/or investigation in my opinion, death occurred at the time, date, and place, and due to the cause(s) as stated.

CORONER On the basis of examination and/or investigation in my opinion, death occurred at the time, date, and place, and due to the cause(s) as stated.

PART II. Other significant conditions - Conditions contributing to death but not previously listed in Part I

27 WAS DECEDENT

28 WHEN AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH (Yes or no)

29 CHRONIC OBSTRUCTIVE LUNG DISEASE (Yes or no)

CAUSE OF DEATH

26 PART I

Immediate cause (The disease or condition)

Respiratory failure

Underlying cause (The disease or condition that caused the death. Do not enter a remote cause such as trauma, but only one cause on each line)

Metastatic carcinoma

Due to (or as a consequence of)

Respiratory failure

Due to (or as a consequence of)

Metastatic carcinoma

Due to (or as a consequence of)

Respiratory failure

DISPOSITION

24a SIGNATURE OF FUNERAL DIRECTOR

Joseph C. Lauer

24b LICENSE NUMBER

FD01018769

24c HOME ADDRESS AND LICENSE NUMBER OF FUNERAL HOME

FDH3002851 C.G. Huber 722-1654 S Hammond, Indiana 46320

25a EMPLOYER'S NAME

Joseph C. Lauer

25b EMPLOYER'S LICENSE NO.

FD101043572

25c DATE AND PLACE OF DISPOSITION (Name of cemetery, crematory, or other place)

Elmwood Cemetery Hammond, Indiana

25d METHOD OF DISPOSITION

Burial  Cremation  Other (Specify)

25e DATE AND PLACE OF DISPOSITION (Name of cemetery, crematory, or other place)

January 15, 1990 Hammond, Indiana

INFORMANT

20a NAME AND ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code)

John Diederich 18331 Sherman St. Lansing, IL 60438

20b Relationship

Wife

PARENTS

18 FATHER'S NAME (Full name, maiden surname)

John Diederich

19 MOTHER'S NAME (Full name, maiden surname)

Katharine Stahl

14a 2b SEX

Male

14b 2c RACE

White

14c 2d ETHNIC OR HISPANIC ORIGIN

USA

14d 2e CITIZENSHIP

USA

14e 2f MARITAL STATUS

Married

14f 2g DATE AND PLACE OF BIRTH (Month, Day, Year)

310-22-3120 A 63

DECEDENT

10 MARITAL STATUS

Married

11 SURVIVING SPOUSE (Full name, maiden name)

Palacella Farka

12 DECEASED'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use terms)

Tooling

13a RESIDENCE - STATE

INDIANAS

13b COUNTY

COOK

13c CITY, TOWN, OR LOCATION

LANSING

13d STREET AND NUMBER

18331 SHERMAN STREET

14 DECEDENT'S EDUCATION

11

PERMANENT BLACK INK

15a YEAR LAST SERVED IN U.S. ARMED FORCES?

Yes

15b PLACE OF DEATH (Check only one box)

Hospital  Home  Other (Specify)

16a COUNTY OF DEATH

LAKE

16b CITY, TOWN OR LOCATION OF DEATH

MUNSTER

16c COUNTY OF BIRTH (State or Foreign Country)

Hammond, Indiana

16d DATE OF BIRTH (Month, Day, Year)

APRIL 6, 1926

16e TIME OF DEATH

5 00P

16f DATE OF DEATH (Month, Day, Year)

JANUARY 12, 1990

TYPE/PRINT

1 DECEDENT - NAME (Full name, last)

ALBERT DIEDERICH

## INDIANA STATE BOARD OF HEALTH CERTIFICATE OF DEATH

Local No. 100,90

State No. ....

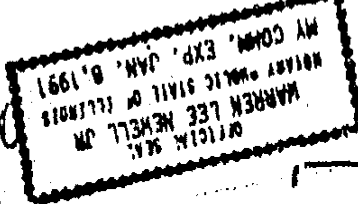
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15907065

Notary Public

03-870651



*[Signature]*

19 90

me this 12th day of March

Subscribed and sworn to before

PRISCILLA H. DIEDERICH

*Priscilla H. Diederich*

truth of the statements herein contained.  
ment as true, and in consideration thereof affiant guarantees the  
without additional evidence of non-liability, relying on this state-  
of Titles of Cook County, Illinois, to issue a Certificate of Title  
and I make this affidavit for the purpose of inducing the Registrar

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

(select one - initial choice)

that regarding Federal Estate Tax or State Inheritance Tax)  
(3) That as a consequence, I represent to the Registrar of Titles

Albert J. Diederich, who died on January 12, 1990.

(2) I am personally acquainted with the affairs of the Estate of

and reside at 18331 Sherman, Lansing, IL 60438.

(1) I am PRISCILLA H. DIEDERICH, spouse (name and capacity)

oath, deposes and states as follows;

Tax for the Estate of decedent herein, being first duly sworn upon  
The Affiant, regarding the possible liability for State Inheritance

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OCs 184 3M 5.47 (FORM 302)

Affidavit by Surviving Joint Tenant

L. R. .... Doc. No. 1244946-F Certificate No. 537321
State of Illinois
County of Cook

PRISCILLA H. DIEDERICH

being first

duly sworn, upon oath deposes and says:

That she... resides at 18311 Sherman... in the City of Lansing...
and that she... is one of the parties who took title, not in tenancy in cominon, but in joint tenancy,
to real estate shown in Certificate of Title No. 537321 situated in said Cook County, Illinois,

South Sixteen (16) feet of Lot Nine------(9)
Lot Ten------(10)

In Block "H" in Lansing Resubdivision of the West Half (1/2) of the
Northeast Quarter (1/4) of the Southwest Quarter (1/4) of Section 31, 32
Town 36 North, Range 15, East of the Third Principal Meridian,
according to plat recorded in the Recorder's Office, of Cook County,
Illinois, June 26, 1873 in Book 5 of Plats Page 33.

30-32-315-010
18311 Sherman Lansing

as is confirmed by a Certificate of the health department of said municipality hereto attached.

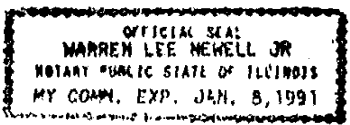
Affiant states that the remaining joint tenant... has not changed her marital status since
the issuance of Certificate of Title Number 537321 (except... who
has been married but once since acquiring said real estate and then to Albert J. Diederich...).

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.

Priscilla H. Diederich
PRISCILLA H. DIEDERICH

Subscribed and sworn to before me
this 12th day of March, 1990

[Signature]
NOTARY PUBLIC



3870651

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RECORDED

South Sixteen (16) feet of Lot Nine----- (9)  
Lot Ten----- (10)

In Block "H" in Lansing Resubdivision of the West Half (1/2) of the  
Northeast Quarter (1/4) of the Southwest Quarter (1/4) of Section 31,  
Town 36 North, Range 15, East of the Third Principal Meridian,  
according to plat recorded in the Recorder's Office of Cook County  
Illinois, June 26, 1873 in Book 5 of Plats Page 33.

Property of Cook County Clerk's Office

3870651

1990 APR -3 PM 2:08

CAROL MOSSLEY BRACK  
REGISTRAR OF TITLES

3870651

3870651

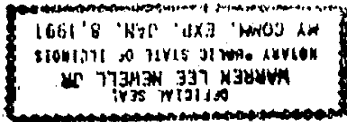


W. Newell  
137 Polasky Rd  
Culver City  
60409

1600100

53732  
20265





NOTARY PUBLIC  
Subscribed and sworn to before me  
this 12th day of March 1980

PRISCILLA H. DIEDERICH

*Priscilla H. Diederich*  
the truth of the statements herein contained.  
described premises, relying on this statement as true, and in consideration thereof affiant guarantees  
of Cook County, Illinois, to issue a certificate of title to the surviving joint tenant to said above  
Further, that the affiant makes this affidavit for the purpose of inducing the Registrar of Title  
has been married but once since acquiring said real estate and then to Albert J. Diederich,  
the issuance of Certificate of Title Number 537321 (except who  
Affiant states that the remaining joint tenant has not changed marital status since  
as is confirmed by a Certificate of the health department of said municipality hereto attached  
Affiant states that one of the said owners in joint tenancy, died intestate, in the city (Village) of Heald in the State of Indiana  
Albert J. Diederich

SEE REVERSE SIDE FOR LEGAL DESCRIPTION

described as follows:

**Affidavit by Surviving Joint Tenant**

L. R. Doc. No. 1244946-R Certificate No. 537321

3870651

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subscribed and sworn to before me

1  
537321  
not

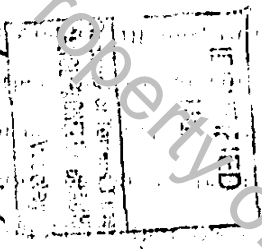
1001 00

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CAROL MORTIMER CLARK  
REGISTRAR OF TITLES  
1990 APR -3 PM 2:08

3870651



W. Maxwell  
134 Pyrusky Rd  
Culmerville, Ohio  
60409

In Block "H" in Lansing Resubdivision of the West Half (1/2) of the  
Northeast Quarter (1/4) of the Southwest Quarter (1/4) of Section 31,  
Town 36 North, Range 15, East of the Third Principal Meridian,  
according to plat recorded in the Recorder's Office of Cook County,  
Illinois, June 26, 1873 in Book 5 of Plats Page 33.

1001001