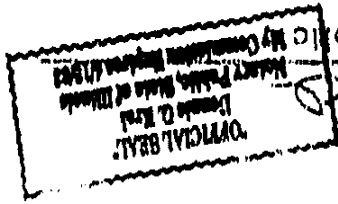


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*Pursuant to H.B. 93, P.A. 82-1021



1990

me this 30 day of April

Subscribed and sworn to before

Kosmarna Dombrowski

the truth of the statements herein contained, relying on this statement as true, and in consideration thereof affiant guarantees

to issue a Certificate of Title without additional evidence of non-liability,

for the purpose of inducing the Registrar of Titles of Cook County, Illinois,

Federal Estate Tax or State Inheritance Tax is due*, and I make this affidavit

(4) That, as a consequence, I represent to the Registrar of Titles that no

necessary,

that no Federal Estate Tax Return has been filed, is contemplated or is

(3) That, based on the total value of the Estate of the deceased, I know

Kosmarna, who died on January 28, 1990

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

and reside at 15503 Evans, South Holland, IL 60473

(1) I am Kosmarna Dombrowski

deposes and states as follows:

for the Estate of decedent herein, being first duly sworn upon oath,

The Affiant, regarding the possible liability for State Inheritance Tax

APPIDAVIT OF NO ESTATE TAX DUE

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RECORDS SECTION

10/10/2010

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STATE FILE NUMBER

MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO 160
REGISTERED NUMBER

DECEASED NAME FIRST MIDDLE LAST <u>Louise E. McNamara</u>		SEX <u>2 Female</u>	DATE OF DEATH MONTH DAY YEAR <u>3 January 28, 1990</u>
COUNTY OF DEATH <u>Cook</u>		DATE OF BIRTH MONTH DAY YEAR <u>50 February 2, 1911</u>	IF HOSP OR INPATIENT SPECIFY HOSPITAL OR OTHER INSTITUTION NAME IF NOT EITHER GIVE STREET AND NUMBER <u>Resthaven South Nursing Home</u>
CITY, TOWN, TRSF. OR ROAD DISTRICT NUMBER <u>South Holland</u>		EDUCATION (SEE INSTRUCTIONS) SCHOOL GRADE COMPLETED <u>12</u>	IF DECEASED WAS ADMITTED TO HOSPITAL (YES OR NO) <u>9 No</u>
MARRIED, NEVER MARRIED, RECORDED (DO NOT CHECK IF MARRIED) <u>2 Widowed</u>		NAME OF SURVIVING SPOUSE (GIVEN NAME & AKA) <u>None</u>	EDUCATION (SEE INSTRUCTIONS) SCHOOL GRADE COMPLETED <u>12</u>
SOCIAL SECURITY NUMBER <u>334-18-3102</u>		INDUSTRY <u>Telephone</u>	CITY, TOWN, TRSF. OR ROAD DISTRICT NO <u>10 South Holland</u>
RESIDENCE STREET AND NUMBER <u>16502 S. Evans Avenue</u>		CITY, TOWN, TRSF. OR ROAD DISTRICT NO <u>10 South Holland</u>	CITY, TOWN, TRSF. OR ROAD DISTRICT NO <u>10 South Holland</u>
STATE <u>Illinois</u>		RACE (WHITE, BLACK, AMERICAN INDIAN OR ALASKA NATIVE) <u>White</u>	ETHNIC ORIGIN (SPECIFY) <u>194 Cook</u>
FATHER NAME FIRST MIDDLE LAST <u>Vincent Schuch</u>		MOTHER NAME FIRST MIDDLE LAST <u>Alotisia Dietz</u>	RELATIONSHIP <u>Daughter</u>
MARRIAGE RECORD (SEE INSTRUCTIONS) <u>17a Rosemary Dombrowski</u>		RELATIONSHIP <u>Daughter</u>	REGISTRATION DISTRICT NO <u>160</u>
18 PART I (For immediate cause of death only - see instructions on reverse) <u>Immediate Cause (from doctor or coroner report or death certificate) (a) Cause of death (b) Due to or as a consequence of (c) Conditions, if any, which gave rise to immediate cause (d) Stating the underlying cause last</u>		19a YES 19b NO <u>19a No 19b No</u>	
20a DATE OF OPERATION, IF ANY <u>1/17/90</u>		20b MAJOR FINDINGS OF OPERATION <u>Dis's Medico</u>	
21a ADDITIONAL INFORMATION (SEE INSTRUCTIONS) <u>11/17/90</u>		21b WAS CORPSE FOR MEDICAL EXAMINATION (YES OR NO) <u>No</u>	
22a SIGNATURE AND ADDRESS OF CERTIFIER <u>G. R. Gnade, 71 W. 156th, Harvey, IL 60426</u>		22b DATE SIGNED (MONTH DAY YEAR) <u>1/29/90</u>	
23a NAME OF ATTENDING PHYSICIAN OR OTHER THAN CERTIFIER (SEE INSTRUCTIONS) <u>None</u>		23b ILLINOIS LICENSE NUMBER <u>5C33274</u>	
24a BURIAL LOCATION (SEE INSTRUCTIONS) <u>St. Mary Cemetery</u>		24b DATE (MONTH DAY YEAR) <u>24 Jan. 31, 1990</u>	
25a HENRY C. DRUMPH FUNERAL HOME 1200 E. 162nd St., So. Holland, IL 60473		25b FUNERAL HOME TELEPHONE AND LICENSE NUMBER <u>256 6716</u>	
26a SIGNATURE AND ADDRESS OF REGISTRAR <u>Charles Thompson, 1500 S. Maybrook Drive, Maywood, Illinois, 60153</u>		26b DATE <u>January 29, 1990</u>	

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 January 29, 1990 SIGNED Charles Thompson
At Cook County Department of Public Health Official Title, Chief Deputy Registrar.
1500 S. Maybrook Drive, Maywood, Illinois, 60153

1900-1991 I-81

3877378

(FORM 302)

Affidavit by Surviving Joint Tenant

L. R. Doc. No. Certificate No. 1397987

State of Illinois }
County of Cook } ss.

Rosemary Dombrowski being first
duly sworn, upon oath deposes and says:

That she resides at 11502 Evans in the City of So. Holland
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. 1397987 situated in said Cook County, Illinois,
described as follows: Lot 103 in 2nd addition to Catalina, being a Subdivision of part
of the South West Quarter of Section 23, Township 36 North, Range 14, East of the
Third Principal Meridian, according to Plat thereof registered in the Office of the
REGistrar of Titles of Cook County, Illinois, on March 23, 1964, as document number
2141165.

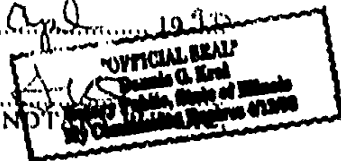
Affiant states that Louise McNamara one of the said owners in joint
tenancy, died intestate, in the city (Village) of So. Holland in the State of Illinois
as is confirmed by a Certificate of the health department of said municipality hereto attached.

Affiant states that the remaining joint tenants have not changed their marital status since
the issuance of Certificate of Title Number 1397987 (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.

Rosemary Dombrowski
Rosemary Dombrowski

Subscribed and sworn to before me
this 30 day of April 1977



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Number of ...

Property of Cook County Clerk's Office

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1867987
G.M.

3877378

IDENTIFIED	ESSEX
COOK COUNTY	REGISTRAR
3877378	

5-1229719

COOK COUNTY CLERK'S OFFICE
111 North La Salle Street
Chicago, Illinois 60602