

# UNOFFICIAL COPY

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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 Loretta A. Goszczynski  
(name and capacity)

and reside at 7321 W. Carol, Niles, IL.

(2) I am personally acquainted with the affairs of the Estate of Henry T. Goszczynski, who died on 3/2/67.

(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)

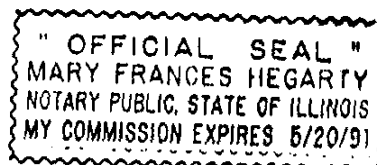
- x 1) that no Tax is due; or \_\_\_\_\_  
\_\_\_\_\_ 2) that if any Tax due, there are sufficient other assets to pay such Tax; or \_\_\_\_\_  
\_\_\_\_\_ 3) that any Tax due has been paid. \_\_\_\_\_

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.

Loretta A. Goszczynski

Subscribed and sworn to before  
me this 3<sup>rd</sup> day of August;  
19 90.

Mary Frances Hegarty  
Notary Public



MAR. 3, 1967

STATE OF ILLINOIS  
COUNTY OF COOK  
CITY OF CHICAGO

SS

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BUREAU OF STATISTICS - ILLINOIS DEPARTMENT OF PUBLIC HEALTH

1960 revision based on the U.S. Standard Certificate of Death.

1. PLACE OF DEATH  
a. STATE ILLINOIS  
b. COUNTY COOK  
c. CITY Chicago

2. USUAL RESIDENCE (where decedent received last permanent residence, residence before admission)  
a. STATE ILLINOIS  
b. CITY Chicago  
c. DISTRICT NO. 2  
d. REGISTERED NUMBER 16087

3. NAME OF DECEASED Henry T. Rosetzynski  
a. FIRST NAME Henry  
b. MIDDLE NAME T.  
c. LAST NAME Rosetzynski

4. DATE OF DEATH 3-2-1967  
a. MONTH 3  
b. DAY 2  
c. YEAR 1967

5. SEX MALE  
6. RACE WHITE

7. MARRIED NEVER MARRIED  
8. DALE OF BIRTH 11-8-1915  
a. MONTH 11  
b. DAY 8  
c. YEAR 1915

9. AGE (years, months, days) 51  
10. USUAL OCCUPATION HACHINIST  
11. BIRTHPLACE (City and State or foreign country) CHICAGO - ILLINOIS

12. CITIZENSHIP OF WHO? C.S.A.

13. FATHER'S FULL NAME STAWLEY ROSEZYNSKI  
14. MOTHER'S FULL NAME Sophie S. Szymkiewicz

15. Was decedent ever in U.S. Armed Forces? (If yes, no. of years) No  
16. SOCIAL SECURITY NUMBER 331-05-9448

17. MEDICAL CAUSE OF DEATH  
PART I: PARTIAL CAUSE (A) CRANIO-CEREBRAL, CEREBRAL & SPINE  
PART II: IMMEDIATE CAUSE (B) AND SPINAL CORD, AND OTHER LESIONS  
PART III: UNDERLYING CAUSE (C) Auto - Concussive

18. GROSS ANATOMICAL CONDITIONS CONTRIBUTING TO DEATH BUT NOT REFERRED TO THE IMMEDIATE CONDITION  
19a. DATE OF OPERATION  
19b. MAJOR FINDINGS OF OPERATION

20. ACCIDENT OR SUICIDE UNDETERMINED  
21. PLACE OF INJURY 111 STREET  
22. TIME OF INJURY 3-2-67  
23. DISPOSITION OF BODILY REMAINS St. Adalbert's Cemetery, Chicago, Ill.

24. FUNERAL EXPENSES \$1100  
25. SIGNATURE OF REGISTRAR Samuel L. Andelman  
26. ADDRESS OF REGISTRAR 6500 N. Lincoln Ave., Chicago, Ill. 60656

I, Samuel L. Andelman, M.D., 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 of a record kept by me in pursuance of said laws and ordinances.

This Certified Copy VALID Only When Original BLT SEAL AND BLT SIGNATURE Are Affixed  
Samuel L. Andelman  
LOCAL REGISTRAR

*D*

ocs 164 5M 5.47 (FORM 302)

**Affidavit by Surviving Joint Tenant**

L. R. ....8329..... Doc. No. ....1885135..... Certificate No. ....826300.....

State of.....Illinois..... }  
County of.....Cook..... } ss.

Loretta A. Goszczynski ..... being first

duly sworn, upon oath deposes and says:

That s/he... resides at...7321 W. Carol.....in the City of...Niles.....  
and that s/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. 826300.....situated in said Cook County, Illinois,

described as follows: LOT ONE----- (1)

In Block Two(2), in Kath's Subdivision of part of the Northeast Quarter(¼)  
of the Northeast Quarter(¼) of Section Twenty-Four (24) Township  
Forty One (41) North, Range Twelve (12), East of the Third Principal  
Meridian, according to Plat thereof registered in the Office of the  
Registrar of Titles of Cook County, Illinois, on October 16, 1956, as  
Document Number 1701788.

7321 W. Carol Niles, #09-24-212-011

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

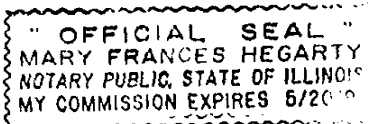
Affiant states that the remaining joint tenant... has not changed... her... marital status since  
the issuance of Certificate of Title Number...826300..... (except..... who  
has been married but once since acquiring said real estate and then to.....).

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.

*Loretta A. Goszczynski*

Subscribed and sworn to before me  
this 3rd day of August, 1990

*Mary Frances Hegarty*  
NOTARY PUBLIC.

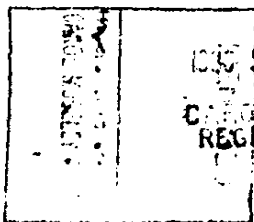


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REGISTRAR OF TITLES

Handwritten notes in the top right corner, including the number '87630' and some illegible scribbles.

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