

UNOFFICIAL COPY

0 3 9 5 2 5 0 6

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 JOSEPH BALLACKER, surviving spouse of LYDIA BALLACKER
(name and capacity)

and reside at 4123 North Sacramento, Chicago, Illinois 60618.

(2) I am personally acquainted with the affairs of the Estate of LYDIA BALLACKER, who died on MARCH 1, 1989.

(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. _____

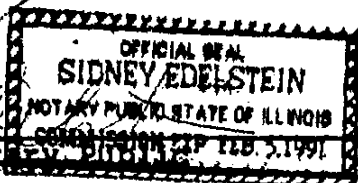
and I make this affidavit for the purpose of inducing the Registrar of Titles of Cook County, Illinois, to issue a Certificate of Title without additional evidence of non-liability, relying on this statement as true, and in consideration thereof affiant guarantees the truth of the statements herein contained.

Joseph Ballacker

JOSEPH BALLACKER

Subscribed and sworn to before
me this 13th day of December;

19 90.



UNOFFICIAL COPY

Property of Cook County Clerk's Office

REGISTRATION NO. 16110
 DISTRICT NO. 16110
 REGISTERED NUMBER

STATE OF ILLINOIS
 MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 60-12248

March 3, 1989.

STATE OF ILLINOIS
 COUNTY OF COOK
 CITY OF CHICAGO

SS

I, LONNIE C. EDWARDS MD, MPA, 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 AS A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES.

L. Edwards
 LOCAL REGISTRAR

THIS CERTIFIED COPY VALID WHEN MULTICOLOR SEAL AND BLUE SIGNATURE ARE AFFIXED

DECEASED-NAME FIRST MIDDLE LAST SEX DATE OF DEATH MONTH DAY YEAR

1. COUNTY OF DEATH LYDIA BALLACKER Female 1 March 1, 1989

2. CITY, TOWN, TWP, OR ROAD/DISTRICT NUMBER 3035-10-9396

3a. CHICAGO 3b. BELMONT COMMUNITY HOSPITAL 3c. COOK

4. COOK 5a/8 5b/ 5c/ 5d December 16, 1910

6a. BIRTH AGE, CITY AND STATE OR COUNTY 7. WISCONSIN 8a. BELMONT COMMUNITY HOSPITAL 8b. JOSEPH BALLACKER 9. NO

10. 3035-10-9396 11a. CLERK 11b. STRAPPING CO. 12. 8

13a. 4340 No. Keystone 13b. CHICAGO 13c. COOK 13d. COOK

14a. ILLINOIS 14b. ZIP CODE 60618 14c. WHITE RACE 14d. MARRIED

15. MICHAEL CONSTANCE 16. ELIZABETH 17. BELMONT COMMUNITY HOSPITAL

17a. EMILIA P. MARIANO 17b. 17c. BELMONT COMMUNITY HOSPITAL

18. PART I. Cause of death (Immediate Cause (final disease or condition resulting in death)) (a) ACUTE ANTEROSEPTAL MYOCARDIAL INFARCTION (b) ACUTE SEPTIC SHOCK (c) ACUTE RENAL FAILURE

19a. DATE OF OPERATION, IF ANY 19b. MAJOR FINDINGS OF OPERATION 19c. AUTOPSY (YES/NO) 19d. HOURS

20a. (DO) DID NOT ATTEND THE DECEASED AND LAST SAW HIM HER ALIVE ON 20b. 20c. 20d. 20e. 20f. 20g. 20h. 20i. 20j. 20k. 20l. 20m. 20n. 20o. 20p. 20q. 20r. 20s. 20t. 20u. 20v. 20w. 20x. 20y. 20z.

21a. March 1, 1989 21b. 21c. 21d. 21e. 21f. 21g. 21h. 21i. 21j. 21k. 21l. 21m. 21n. 21o. 21p. 21q. 21r. 21s. 21t. 21u. 21v. 21w. 21x. 21y. 21z.

22a. Boguslaw Chmiel, M.D. 5329-1/2 Belmont Chicago, Ill. 60641 22b. 22c. 22d. 22e. 22f. 22g. 22h. 22i. 22j. 22k. 22l. 22m. 22n. 22o. 22p. 22q. 22r. 22s. 22t. 22u. 22v. 22w. 22x. 22y. 22z.

23. NAME OF ATTENDING PHYSICIAN OR OTHER HEALTH CARE PROVIDER

24a. BIRTH, CREATION, REVISION, OR AMENDMENT 24b. 24c. 24d. 24e. 24f. 24g. 24h. 24i. 24j. 24k. 24l. 24m. 24n. 24o. 24p. 24q. 24r. 24s. 24t. 24u. 24v. 24w. 24x. 24y. 24z.

25a. FUNERAL HOME 25b. 25c. 25d. 25e. 25f. 25g. 25h. 25i. 25j. 25k. 25l. 25m. 25n. 25o. 25p. 25q. 25r. 25s. 25t. 25u. 25v. 25w. 25x. 25y. 25z.

26a. LOCAL REGISTRAR SIGNATURE 26b. DATE FILED BY LOCAL REGISTRAR (MONTH DAY YEAR)

UNOFFICIAL COPY

Property of Cook County Clerk's Office

(FORM 302)

Affidavit by Surviving Joint Tenant

L. R. Doc. No. Certificate No. 1179610

State of ILLINOIS }
County of COOK } ss.

JOSEPH BALLACKER being first

duly sworn, upon oath deposes and says:

That he resides at 423 N. Sacramento Ave. in the City of Chicago
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. 1179610 situated in said Cook County, Illinois,

described as follows:

Lot 34 and the South 1/2 of Lot 35 in Block 12 in Rose Park, A Subdivision of the East 1/2 of the South West 1/4 of Section 13, Township 40 North, Range 13 East of the Third Principal Meridian, in Cook County, Illinois.

pin 13-13-320-010
PA 423 N Sacramento Chicago IL

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

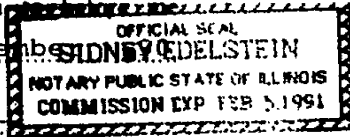
Affiant states that the remaining joint tenant has not changed his marital status since the issuance of Certificate of Title Number 1179610 (except N/A who has been married but once since acquiring said real estate and then to).

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.

Joseph Ballacker

Subscribed and sworn this 13th day of December

[Signature]



NOTARY PUBLIC.

FI 72-83-655

64

3932508

UNOFFICIAL COPY

Property of Cook County Clerk's Office

3932508

11/19/08

S

CAROL MOSELEY BRAUN
REGISTRAR OF TITLES
1030 DEC 13 PM 4:11

0932508 No	Registrar of Titles Title: CAROL MOSELEY BRAUN C.T.L. GRABSKI
---------------	---

CHECKED TITLE INS. CO.
09 2283655

11/19/08