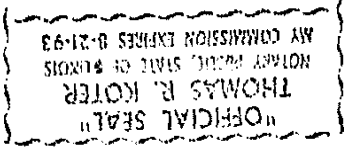


UNOFFICIAL COPY

Pursuant to H. B. No. 93, P. A. 82-1021



Notary Public
[Signature]
1991

me this 24th day of April

Subscribed and sworn to before

ELSEE A. KOTER (4-22-91)

X *[Signature]*

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.

- 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. _____
- (select one - initial choice)

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

(2) I am personally acquainted with the affairs of the Estate of OTTO KOTER, who died on MARCH 4, 1991.

and reside at 1325 DENNIS PLACE, DES PLAINES, ILLINOIS 60018.

(1) I am ELSEE A. KOTER (name and capacity)

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:

912433

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I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named written 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.

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DATE MARCH 7, 1991
at Cook County Department of Public Health

Signed Victoria A. Depate
Official Title, Chief Deputy Registrar

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER

REGISTRATION DISTRICT NO 1400
REGISTERED NUMBER

DECEASED-NAME Otto FIRST Koter MIDDLE Koter LAST Koter SEX Male DATE OF DEATH (MONTH, DAY, YEAR) 3 March 4, 1991

COUNTY OF DEATH Cook AGE-LAST BIRTHDAY (MRS) 76 UNDER 1 YEAR 1 UNDER 1 DAY 2 JUDGES DAY 3 DATE OF BIRTH (MONTH, DAY, YEAR) 5d June 20, 1914

CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER Des Plaines HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT MEMBER ONE STREET AND NUMBER) Holy Family Hospital FATHER'S COUNTY, STATE, INDICATE D.O.A. OR BURIAL (IF PATIENT SPECIFY) Emmeqancy Rm.

6a. Des Plaines 6b. Holy Family Hospital
BIRTHPLACE, CITY AND STATE (IF FOREIGN, INDICATE COUNTRY) Chicago, Ill. MARRIED, RE-MARRIED, DIVORCED, SEPARATED (SPECIFY) Married NAME OF SURVIVING SPOUSE (MARRIAGE NUMBER) Eisee Kostka
SOCIAL SECURITY NUMBER 318-05-7387 USUAL OCCUPATION: Accountant KING OF BUSINESS OR INDUSTRY Savings & Loan EDUCATION (SPECIFY GRADE COMPLETED) 12 HIGHER EDUCATION (SPECIFY DEGREE) Yes
RESIDENCE (STREET AND NUMBER) 1325 Dennis Place CITY, TOWN, TWP, OR ROAD DISTRICT NO. Des Plaines INSIDE CITY Yes COUNTY Cook
STATE Illinois ZIP CODE 60018 RACE (WHITE, BLACK, AMERICAN INDIAN OR ALASKA NATIVE, HISPANIC ORIGIN) White OF HISPANIC ORIGIN? (SPECIFY) Yes YES-SPECIFY COUNTRY (MEXICAN, GUATEMALA, ETC.)

FATHER-NAME Joseph FIRST Joseph MIDDLE Kotrdaty LAST Kotrdaty MOTHER-NAME Marie FIRST Marie MIDDLE Vokurka LAST Vokurka
15. INFORMANT-NAME (TYPE OF RELATIONSHIP) Joseph RELATIONSHIP Wife 16. MARRIAGE LICENSE NUMBER (CITY, TOWN, STATE, YEAR) 1325 Dennis Place Des Plaines Ill. 60018

17a. Eisee Koter 17b. Wife 17c. Dennis Place
Immediate Cause (Final) Acute myocardial infarction
diagnosed or condition resulting in death Error: The diseases, or conditions that caused the death. Do not enter the cause of death such as cardiac or respiratory arrest.
CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) Coronary artery disease
STATE THE UNDERLYING CAUSE LAST (b) Diabetes mellitus

PART II: DATE OF OPERATION, IF ANY None MAJOR FINDINGS OF OPERATION Diabetes mellitus
20a. DATE OF OPERATION, IF ANY None MAJOR FINDINGS OF OPERATION Diabetes mellitus
20b. REFERENCE WAS THERE A PREGNANCY IN THE THREE MONTHS PRECEDING DEATH? YES NO

21a. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED Yes
21b. WAS CORONER OR MEDICAL EXAMINER CALLED? YES NO
21c. HOUR OF DEATH 4:30 PM
21d. DATE SIGNED (MONTH, DAY, YEAR) 3-4-91

22a. SIGNATURE Victor Decker (TYPE OR PRINT)
NAME AND ADDRESS OF CERTIFIER (IF PERSON)
22b. ILLINOIS LICENSE NUMBER D36-050413
NAME OF ATTENDING PHYSICIAN (IF OTHER THAN CERTIFIER) TYPE OR PRINT Estes

23. BURIAL CREATION, REMOVAL (SPECIFY) Cremation CEMETERY OR CREMATORY-NAME Acacia Park Cemetery LOCATION Chicago, Illinois STATE Illinois DATE (MONTH, DAY, YEAR) 24d Mar. 7, 1991
24a. FUNERAL HOME Oehler Funeral Home STREET AND NUMBER OR R.F.D. 555 Lee Street CITY OR TOWN Des Plaines STATE Illinois ZIP 60018
24b. FUNERAL DIRECTOR'S SIGNATURE Steve
24c. FUNERAL HOME Des Plaines, Illinois

25a. LOCAL REGISTRAR'S SIGNATURE KAREN L. SCOTT, MD DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) March 7, 1990
25b. REGISTRAR Victoria A. Depate DIVISION OF VITAL RECORDS
25c. ILLINOIS DEPARTMENT OF PUBLIC HEALTH - DIVISION OF VITAL RECORDS

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3964263

(FORM 302)

912433

3964263

Affidavit by Surviving Joint Tenant

L. R. 4994 Doc. No. 1438265 Certificate No. 626119

State of ILLINOIS
County of COOK ss.

ELSEE A. KOTER (a widow) being first
duly sworn, upon oath deposes and says:

That S.he... resides at 1325 DENNIS PLACE in the City of DES PLAINES,
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. 626119 situated in said Cook County, Illinois,
described as follows:

Lot Eight----- (8) B) on Via----- (8)

In Herrog and Kuntze's Subdivision of Lot Eight (8) in Carl Lagerhausen's estate Division
in the Southwest Quarter (1/4) of Section 29, Township 41 North, Range 12, East of the Third
Principal Meridian, in Cook County, Illinois, according to Plat Document Number 130444.

09-20-309-010

Affiant states that OTTO KOTER one of the said owners in joint
tenancy, died intestate, in the city (Village) of DES PLAINES, 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 626119 (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.

x Elsee A. Koter
ELSEE A. KOTER 4-22-91

Subscribed and sworn to before me
this 21st day of APRIL 1991

[Signature]
NOTARY PUBLIC.

NOTARIAL SEAL
THOMAS R. KOEHLER
JANUARY 1991 - DECEMBER 31, 1993
NOTARY COMMISSION EXPIRES 8-21-93

(215) 467-0510
Chicago, IL 60610

COOK COUNTY CLERK'S OFFICE
RECORDED
APR 22 1991

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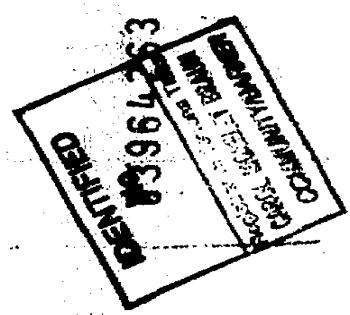
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Property of Cook County Clerk's Office

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03964263

ESR MAY 14 PM 12:19
CAROL MOSELEY BRAUN
REGISTRAR OF TITLES



03964263

COMMUNITY TITLE GUARANTY CO.
1450 N. La Salle Street
Chicago, IL 60610
(312) 464-0210