

Affidavit by Surviving Joint Tenant

L. R. 18663 Doc. No. 1618894 Certificate No. 1337889

State of Illinois
County of Cook

Mona Ziegler being first

duly sworn, upon oath (deposes and says:

That she resides at 2807 Martin Dr. in the City of Rolling Meadows
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. 1337889 situated in said Cook County, Illinois.

described as follows:

LOT 1653 IN ROLLING MEADOWS UNIT NO. 10, BEING A SUBDIVISION OF LOT
"U" IN ROLLING MEADOWS UNIT 8 BEING A SUBDIVISION IN THAT PART OF THE
WEST 1/2 OF SECTION 36, TOWNSHIP 42 NORTH, RANGE 10, EAST OF THE THIRD PRINCIPAL MERIDIAN,
LYING SOUTH OF KIRCHOFF ROAD, ACCORDING TO PLAT THEREOF REGISTERED IN THE OFFICE OF THE
REGISTERED IN THE OFFICE OF THE REGISTRAR OF TITLES OF COOK COUNTY ILLINOIS ON SEPTEMBER
7, 1955 AS DOCUMENT NUMBER 1618893, IN COOK COUNTY ILLINOIS
P.I.N. 02-36-110-002
AKA: 2807 MARTIN,, ROLLING MEADOWS IL 60008

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

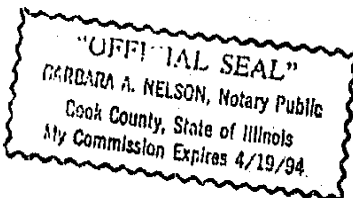
Affiant states that the remaining joint tenant(s) has not changed her marital status since
the issuance of Certificate of Title Number 1337889 (except who
has been married but once since acquiring said real estate and then to).

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.

Mona Ziegler
Mona Ziegler

Subscribed and sworn to before me
this 22nd day of November, 1991

NOTARY PUBLIC.



4014586

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Property of Cook County Clerk's Office

DECEASED

1. DECEASED - NAME: Christopher R. Ziegler (FIRST, MIDDLE, LAST) 2. SEX: Male 3. DATE OF DEATH - (MONTH, DAY, YEAR): March 17, 1988

4. RACE - (WHITE, BLACK, AMERICAN INDIAN, ETC.) (SPECIFY): white 5. ORIGIN OR DESCENT: German 6. AGE - LAST (BIRTHDAY, MONTH, YEAR): 36 7. DATE OF BIRTH - (MO., DAY, YEAR): January 14, 1952 8. COUNTY OF DEATH: Cook

9. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER: Evanston 10. HOSPITAL, OR OTHER INSTITUTION - NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER): St. Francis Hospital 11. IF HOSP. OR INST. INDICATE DOA (OPWEMER, RM, INPATIENT) (SPECIFY): Inpatient

12. SOCIAL SECURITY NUMBER: 351-50-2187 13. USUAL OCCUPATION: Superintendent 14. KIND OF BUSINESS OR INDUSTRY: Printing 15. NAME OF SURVIVING SPOUSE - (MARRIAGE NAME, IF WIFE): Mona Forsman 16. WAS DECEASED EVER IN U.S. ARMED FORCES? YES / NO: NO 17. WAR OR DATES OF SERVICE: none

18. RESIDENCE - STREET AND NUMBER: 2807 Martin Lane 19. CITY, TOWN, TWP. OR ROAD DISTRICT NO: Rolling Meadows 20. INSIDE CITY YES / NO: yes 21. COUNTY: Cook 22. STATE: Illinois

PARENTS

23. FATHER - NAME: Christopher P. Ziegler 24. MOTHER - MAIDEN NAME: Ellen Rassmussen

25. INFORMANT NAME (TYPE OR PRINT): Synda Fox 26. RELATIONSHIP: Clerk 27. MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP): 355 Ridge, Evanston, Il. 60202

CAUSE

28. DEATH WAS CAUSED BY: (ENTER ONE OR MORE CAUSES PER LINE FOR (a), (b), AND (c))

(a) IMMEDIATE CAUSE: Cardio-Pulmonary Arrest (b) DUE TO OR AS A CONSEQUENCE OF: Acute Myocardial Infarction (c) DUE TO OR AS A CONTRIBUTING CAUSE OF: (None listed)

29. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH: HR's

30. CONDITIONS, IF ANY, WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST: (None listed)

31. PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a): Diabetes, Insulin Requiring, Coronary Artery Disease, Secondary Artery Disease

32. DATE OF OPERATION, IF ANY: (None listed) 33. MAJOR FINDINGS OR OPERATIONS: (None listed)

34. IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? YES NO

35. I (WHO, WHO NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON: 3/17/88 36. WAS CORONER OR MEDICAL EXAMINER NOTIFIED YES / NO: NO 37. HOUR OR DEATH: 4:50 P. M.

CERTIFIER

38. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND UNDER THE CAUSE(S) STATED.

39. SIGNATURE: Burton E. Herbst (TYPE OR PRINT) 40. DATE SIGNED (MONTH, DAY, YEAR): 3/18/88

41. NAME AND ADDRESS OF CERTIFIER: M.D. 1100 W. Central, Arlington Hts. Il. 42. ILLINOIS LICENSE NUMBER: 036057120

43. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER: (None listed)

44. NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.

DISPOSITION

45. BURIAL, CREMATION, REMOVAL (SPECIFY): Burial 46. CEMETERY OR CREMATORY - NAME: Chapel Hill Gardens 47. LOCATION: West Elmhurst, Illinois 48. DATE (MONTH, DAY, YEAR): March 21, 1988

49. FUNERAL HOME: Matz Funeral Home, 410 E. Rand Rd., Mt. Prospect, Illinois 60056

50. FUNERAL DIRECTOR'S SIGNATURE: (Signature) 51. FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER: 4510

52. LOCAL REGISTRAR'S SIGNATURE: (Signature) 53. DATE RECEIVED BY LOCAL REGISTRAR (MONTH, DAY, YEAR): March 18, 1988

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named at item 1, and that this record was established and filed in my office in accordance with the provisions of the Illinois Vital Statistics Act.

DATE: MARCH 18, 1988 SIGNED: (Signature) LOCAL REGISTRAR

AT: EVANSTON, Illinois. OFFICIAL TITLE: LOCAL REGISTRAR

The original record of this death is permanently filed with the ILLINOIS DEPARTMENT OF PUBLIC HEALTH at Springfield. County clerks and local registrars are authorized to make certifications from copies of the original record. The Illinois statutes provide that the certification of a death record by the Department of Public Health or the local registrar or the county clerk shall be considered as prima facie evidence of the facts therein stated.

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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 Mona Ziegler (SUBSISTING SPOUSE)
(name and capacity)

and reside at 2807 Martin, Rolling Meadows IL 60008

2) I am personally acquainted with the affairs of the Estate of Christopher Ziegler, who died on March 17, 1988.

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)

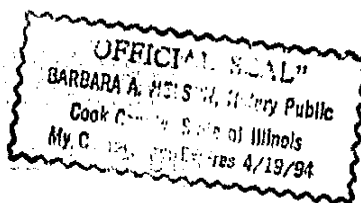
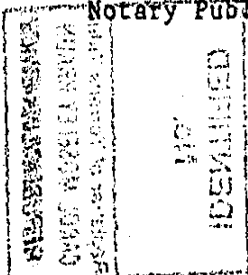
- 1) that no Tax is due; or _____
- 2) that if any Tax due, there are sufficient other assets to pay such Tax; or _____
- 3) that any Tax due has been paid. _____

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

Mona Ziegler
Mona Ziegler

Subscribed and sworn to before me this 22nd day of November; 19 91

Barbara A. Heisler
Notary Public



BOX # 30
E.T.C.

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4014586

CAROL MOSELEY BRAUN
REGISTRAR OF TITLES

1991 NOV 27 PM 3:01

4014586

IDENTIFIED No.
Registrar of Torrens Titles CAROL MOSELEY BRAUN

E.T.C.
Box # 397

Handwritten:
1337
1987
11/27