

AFFIDAVIT AS TO
DECEASED TITLE
HOLDER

2015 024832

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2015 APR 24 AM 10:49

MICHAEL B. BROWN
RECORDER

Property: **4 Highland St., Hammond, Indiana, 46320**

Legal Description:

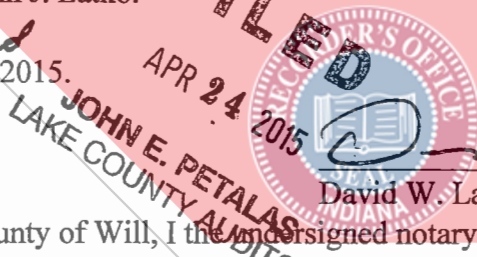
Lots 36, 37, and the West 10 feet of Lot 38, all in Block 8, of the Homewood Addition of the City of Hammond, Lake County, Indiana.

PIN # 45-06-01-154-001-000-023

The undersigned, David W. Latko of Mokena, Illinois, is the son of John J. Latko, who had reserved unto himself a life estate in the subject property. John J. Latko, died on December 18th, 2013 in Hammond, Indiana.

Affiant hereunder makes this statement under oath for purposes of clearing of record the life estate interest of John J. Latko.

Dated: April 22nd, 2015.



David W. Latko

State of Illinois, County of Will, I the undersigned notary public in and for said County and State, do hereby certify that David W. Latko, married to Janice O. Latko, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that he signed, sealed and delivered the said instrument as his free and voluntary act, for the purposes set forth.

Given under my hand and seal this April 22nd, 2015

Notary Public

011745

Prepared by: David W. Latko, 20011 Allison Trail, Mokena, Illinois 60448

Mail to: John A. Latko, 4 Highland St., Hammond, Indiana, 46320

\$13.00
M-E
CASH





INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

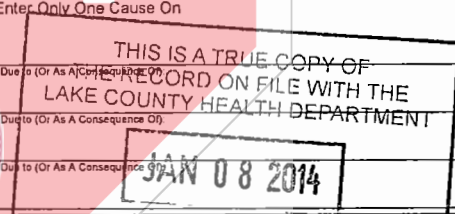
Tracking No. 05647

Local No 004282

EDR No 000000359532

State No 060430

Form fields including: 1. Decedent's Legals Name (JOHN JOSEPH LATKO), 2. Sex (MALE), 3. Time Of Death (15:30), 4. Date Of Death (12/18/2013), 5. Social Security Number, 6a. Age - Yrs (94), 6b. Under 1 Year, 6c. Under 1 Month, 6d. Under 1 Day, 6e. Under 1 Hour, 7. Date of Birth (06/19/1919), 8. Birthplace (EAST CHICAGO, IN), 11. Facility Name (4 HIGHLAND AVENUE), 12. City Or Town, State, And Zip Code (HAMMOND, IN, 46320), 13. County Of Death (LAKE), 14. Marital Status At Time Of Death (Divorced), 15. Surviving Spouse's Name, 16. Decedent's Usual Occupation (BANKER), 17. Kind Of Business/Industry (BANK INDUSTRY), 18. Residence - State (INDIANA), 18a. County (LAKE), 18b. City Or Town (HAMMOND), 18c. Street And Number (4 HIGHLAND AVENUE), 18d. Apt. No., 18e. Zip Code (46320), 18f. Inside City Limits? (Yes), 19. Decedent's Education (HIGH SCHOOL GRADUATE OR GED COMPLETED), 20. Decedent Of Hispanic Origin (NOT HISPANIC), 21. Decedent's Race (White), 22. Father's Name (JOSEPH LATKO), 23. Mother's Name (ROSE LATKO), 23a. Mother's Maiden Last Name (CHAJMIK), 24. Informant's Name (JOHN A LATKO), 24a. Relationship To Decedent (SON), 24b. Mailing Address (6549 HOHMAN AVENUE, HAMMOND, IN 46320), 25a. Method Of Disposition (Burial), 25b. Place Of Disposition (ST JOHN ST JOSEPH CEMETERY), 25c. Location - City, Town, And State (HAMMOND, IN), 26. Was Coroner Contacted? (Yes), 27. Name And Complete Address Of Funeral Facility (BURNS-KISH FUNERAL HOME INC-HAMMOND, 5840 HOHMAN AVE, HAMMOND, IN 46321), 27a. Funeral Home License Number (FH83002819), 27b. Signature Of Indiana Funeral Service Licensee (APOLINARIO MORENO, BY ELECTRONIC SIGNATURE), 27c. License Number (FD20600073), 28. Part I. Enter The Chain Of Events - Diseases, Injuries, Or Complications - That Directly Caused The Death (ALZHEIMERS DISEASE), 28. Part II. Enter Other Significant Conditions Contributing To Death (NONE), 31. Did Tobacco Use Contribute To Death? (No), 32. If Female: (Not Pregnant), 34. Date Of Injury, 35. Time Of Injury, 36. Place Of Injury, 37. Injury At Work?, 38. Location Of Injury - State, 38a. City Or Town, 38b. Street & Number, 38c. Apt. No., 38d. Zip Code, 39. Describe How Injury Occurred, 41. Signature, Of Person Certifying Cause Of Death (HAYSSAM KADAH, BY ELECTRONIC SIGNATURE), 42. Certifier (Check Only One) (Certifying Physician), 44. License Number (01039940A), 45. Date Certified (01/08/2014), 48. Signature of Local Health Officer (SUSAN W. BEST, VIA ELECTRONIC SIGNATURE), 49. For Registrar Only - Date Filed (JAN 08 2014)



RAISED SEAL AFFIXED