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5/12/05 38 001 Page 1 of 4
2000-09-08 10:23:20
Cook County Recorder 27.50



00696703

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
COUNTY DEPARTMENT, PROBATE DIVISION

Estate of Floyd Kaput.)
Deceased.) No.
) Docket
) Page

J.S.H.

AFFIDAVIT OF HEIRSHIP

Helen Spuck, on oath says:

1. The decedent, Floyd Kaput, died in LaGrange, Illinois on May 14, 2000 at the age of 66 years.
2. Affiant is the sister of the decedent, is of legal age, is competent and resides at 6830 South 77th Avenue, Bridgeview, Illinois.
3. The decedent was never married.
4. The decedent did not have any children and did not adopt any children.
5. The decedent's parents were Stanley Kaput and Rose Augustyn Kaput. Stanley Kaput and Rose Augustyn Kaput predeceased the decedent.
6. The decedent had eight brothers and sisters; namely: Joseph Kaput, Leo Kaput, Julia Poloway, Walter Kaput, Henry Kaput, Bernice Radogno, Matthew Kaput, and Helen Spuck.
7. Joseph Kaput and Bernice Radogno predeceased the decedent.
8. Joseph Kaput had one son; namely Joseph Kaput and no others were adopted.
9. Joseph Kaput is alive, over 18, and competent.
10. Bernice Radogno had seven children and no others were adopted. The seven children were: Nunzio Radogno, John Radogno, Margaret Kosinski, Joseph Radogno, Frank Radogno, Andrew Radogno, and Christopher Radogno.
11. Nunzio Radogno, John Radogno, Margaret Kosinski, Joseph Radogno, Frank Radogno, Andrew Radogno, and Christopher Radogno are alive, over 18, and competent.

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12. Leo Kaput, Julia Poloway, Walter Kaput, Henry Kaput, Matthew Kaput, and Helen Spuck, are alive, over 18, and competent.

Based on the foregoing, decedent left surviving as his only heirs the following, who are of legal age and mentally competent:

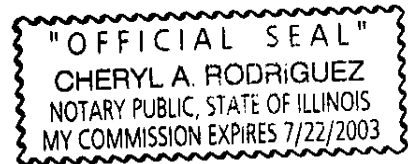
Joseph Kaput, Leo Kaput, Julia Poloway, Walter Kaput, Henry Kaput, Matthew Kaput, Helen Spuck, Nunzio Radogno, John Radogno, Margaret Kosinski, Joseph Radogno, Frank Radogno, Andrew Radogno, and Christopher Radogno.

Helen M. Spuck

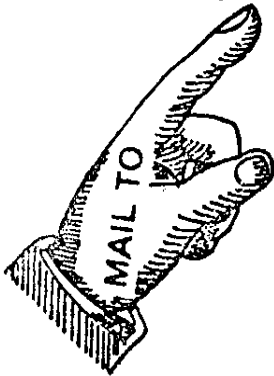
Helen Spuck

Signed and sworn to before me this 11th day of August, 2000.

Cheryl A. Rodriguez
NOTARY PUBLIC



Tracy S. Dalton
Dalton & Dalton, P.C.
6930 West 79th Street
Burbank, IL 60459
708.430-0808
Attorney Code 28226



PROFESSIONAL NATIONAL
TITLE NETWORK, INC.

DECEDENT'S BIRTH NO.

REGISTRATION DISTRICT NO. 16.0
REGISTERED NUMBER

STATE OF ILLINOIS

STATE FILE NUMBER

UNOFFICIAL MEDICAL CERTIFICATE OF DEATH

Type or Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS

DECEASED-NAME FIRST MIDDLE LAST		SEX	DATE OF DEATH (MONTH, DAY, YEAR)
1. FLOYD T KAPUT		2. MALE	3. MAY 14, 2000
COUNTY OF DEATH	AGE-LAST BIRTHDAY (YRS) 5a. 66	UNDER 1 YEAR MOS. 5b.	UNDER 1 DAY HOURS 5c. MIN. 5d.
4. COOK	HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) 6b. LAGRANGE MEMORIAL HOSPITAL		DATE OF BIRTH (MONTH, DAY, YEAR) 5d. NOVEMBER 27, 1933
6a. LAGRANGE	6b. LAGRANGE MEMORIAL HOSPITAL		6c. INPATIENT
BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) 7. ARGO, ILL.	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) 8a. NEVER MARRIED	NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) 8b. -----	WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO) 9. YES
SOCIAL SECURITY NUMBER 10. 359-28-2307	USUAL OCCUPATION 11a. MAINTANACE	KIND OF BUSINESS OR INDUSTRY 11b. C.P.C.	EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) 12. T2
RESIDENCE (STREET AND NUMBER) 13a. 1546 KENMAN	CITY, TOWN, TWP, OR ROAD DISTRICT NO. 13b. LAGRANGE PARK	INSIDE CITY (YES/NO) 13c. YES	COUNTY 13d. COOK
STATE 13e. ILLINOIS	ZIP CODE 13f. 60526	RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY) 14a. WHITE	OF HISPANIC ORIGIN? (SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.) 14b. <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES SPECIFY:

DECEASED

A
B
C
D
E

PARENTS

FATHER-NAME FIRST MIDDLE LAST	MOTHER-NAME FIRST MIDDLE LAST (MAIDEN) LAST
15. STANLEY KAPUT	16. ROSE AUGUSTYN
INFORMANT'S NAME (TYPE OR PRINT) 17a. MELISSA L. HILL	RELATIONSHIP 17b. HOSPITAL
MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) 17c. RECORDS 17d. LAGRANGE, ILLINOIS 60525	

1
2
3

CAUSE

18. PART I. Enter the diseases, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line.

Immediate Cause (Final disease or condition resulting in death) → (a) MULTISYSTEM ORGAN FAILURE

CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.

(b) RESPIRATORY FAILURE

(c) CORONARY BYPASS SURGERY

DD696703 Page 3 of 4

4
5
N
P

OPERATION

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I. MORBID OBESITY	AUTOPSY (YES/NO) 19a. NO	WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (YES/NO) 19b.
DATE OF OPERATION, IF ANY 20a. 4-21-00	MAJOR FINDINGS OF OPERATION 20b. CORONARY ARTERY DISEASE	IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? 20c. YES <input type="checkbox"/> NO <input type="checkbox"/>

CERTIFIER

I (DID) (DID NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON (MONTH, DAY, YEAR) 21a. MAY 14, 2000	WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) 21b. NO	HOUR OF DEATH 21c. 8:20P M.
TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.		
22a. SIGNATURE → Bryan K. Lee	DATE SIGNED (MONTH, DAY, YEAR) 22b. 5-17-00	
NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) 22c. 5201 S. WILLOW SPRINGS RD LAGRANGE, IL 60525	ILLINOIS LICENSE NUMBER 22d. 036079191	
NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.		

DISPOSITION

BURIAL, CREMATION, REMOVAL 24a. BURIAL	CEMETERY OR CREMATORY-NAME 24b. RESURRECTION	LOCATION CITY OR TOWN STATE 24c. JUSTICE ILLINOIS	DATE (MONTH, DAY, YEAR) 24d. 5-18-2000
FUNERAL HOME-NAME STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE ZIP			
25a. FORAN FUNERAL HOME 7300 W. ARCHER AVE. SUMMIT ILLINOIS 60501			
FUNERAL DIRECTOR'S SIGNATURE 25b. [Signature]		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 25c. 034-011087	
LOCAL REGISTRAR'S SIGNATURE 26a. KAREN L. SCOTT, M.D.		DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) 26b. May 18, 2000	

VR200 (Rev. 9/85) Illinois Department of Public Health—Division of Vital Records (BASED ON 1989 U.S. STANDARD CERTIFICATE)

I HEREBY CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT COPY OF THE DEATH RECORD FOR DECEDENT NAMED IN ITEM 1 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 STILL BIRTHS AND DEATHS.

DATE May 18, 2000 SIGNED Gloria Hillis

AT COOK COUNTY DEPARTMENT OF PUBLIC HEALTH OFFICIAL TITLE CHIEF DEPUTY REGISTRAR 1010 LAKE STREET, SUITE 300, OAK PARK, ILLINOIS 60301

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Page 4 of 4

LOT 1 IN ELM TERRACE BEING A SUBDIVISION OF THE EAST 1/2 OF THE SOUTH EAST 1/4
(EXCEPT THE WEST 30 RODS THEREOF) OF SECTION 28, TOWNSHIP 39 NORTH, RANGE 12, EAST
OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN# 15-28-408-013-0000

PREPARED BY: DAITON: DAITON, P.C.
AND MAILED TO: 6930 W. 79th ST.
BURBANK, IL 60459

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