

MAIL TO:

CATHERINE CYCHOSZ
8010 W. BELMONT AVE
CHICAGO, ILL 60634

UNOFFICIAL COPY

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23.6 0099 13 001 Page 1 of 2
2000-11-15 11:38:47
Cook County Recorder 23.50



DECEASED JOINT
TENANCY AFFIDAVIT

STATE OF ILLINOIS]
]]
COUNTY OF]

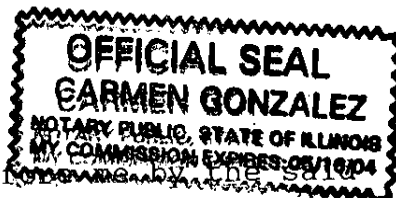
CATHERINE CYCHOSZ being duly
sworn states that she resides at 8010 W BELMONT AVE
in the City of CHICAGO, ILL

That she was acquainted with
FRED MAZZARINO deceased who, at the time of HIS
death, was one of the owners of the land in
COOK County, Illinois, described as:

Lot 16 (except the East 5 feet thereof) and the East 10 feet
of Lot 17 in Block 4 in Feuerborn and Klodes Belmont Terrace,
being a subdivision in the South East quarter lying South of
Indian Boundary Line Section 23, Township 40 North, Range 12,
East of the Third Principal Meridian, in Cook County, Illinois.

P.I.N. 12-23-430-043

That the deceased died Feb. 7 - 2000
as evidenced by a certified copy of death certificate of the
deceased attached hereto.



Subscribed and sworn to before me by the said

Catherine M. Cychosz
this 15th day of November, A.D. 192000

Carmen Gonzalez
Notary Public

X Catherine Cychosz
(affiant signature)

UNOFFICIAL COPY

WINNEBAGO COUNTY REGISTER OF DEEDS

00598900

DOH 5040 (Rev 8/98)
Chap. 69, Wis. Stats.

STATE OF WISCONSIN
DEPARTMENT OF HEALTH AND FAMILY SERVICES
ORIGINAL CERTIFICATE OF DEATH

STATE FILING DATE

185
314

1. DECEASED'S NAME: Fred MAZZARINO
 2. SEX: M
 3. SOC. SEC. NUMBER OF DECEASED: 349-20-4505
 4. FRONTAGE DEAD DATE: Feb 7, 2000
 5. BODY FOUND: 8:00 PM
 6. HOURS: 185
 7. DATE OF BIRTH: May 29, 1927
 8. COUNTY OF DEATH: Winnebago
 9. DEATH AT: HOSPITAL
 10. OTHER PLACE: Wolf River
 11. HOSPITAL (AND CAMPUS) OR NURSING HOME: 7245 County Road H, Wolf River
 12. MARRIAGE STATUS: Married
 13. RESIDENCE - COUNTY: Winnebago
 14. NURSING HOME LICENSE NO.:
 15. STATE OF BIRTH (Country if not in U.S.): Illinois
 16. FATHER'S NAME: Mario Mazzarino
 17. MOTHER'S NAME: Josephine Cavallo
 18. PLACE (e.g. White, Black, Am. Indian, etc.): White
 19. HISPANIC ORIGIN? Spanish, Cuban, Mexican, etc.:
 20. USUAL OCCUPATION (Do not enter "Retired", "Owner & Operator", "Barbera", "Bottling", "Tavern"): Josephine Cavallo
 21. EDUCATION - HIGHEST GRADE COMPLETED: 8th
 22. DEGREE OF CITIZENSHIP: AMERICAN BORN
 23. SURVIVING SPOUSE (If wife, give birth surname; not married since, give st. Middle, Last): Barbara Bott
 24. MAILING ADDRESS: 7245 County Road H Fremont, WI 54940
 25. METHOD OF DISPOSITION: Burial
 26. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): Wolf River Cemetery
 27. LOCATION (City/Village, Town, Ship, State): Wolf River, WI
 28. DATE SIGNED BY FUNERAL SERVICE LICENSEE: Feb 8, 2000
 29. DATE RECEIVED FROM MED. CERT: Feb 10, 2000
 30. FUNERAL SERVICE LICENSEE (or person performing such):
 31. NAME AND MAILING ADDRESS OF ACQUAINTANCE (Street and number, City, State, Zip): A. J. Holly & Sons Ltd P. O. Box 254, Waupaca, WI 54981
 32. MEDICAL CERTIFIER: COBDESEABLE - On the basis of examination and/or investigation, in my opinion, death was pronounced and occurred at the time(s) and place(s) due to the cause(s) and manner stated.
 33. DATE OF DEATH: Feb 7, 2000
 34. MANNER OF DEATH: Natural
 35. DATE OF INJURY (If, Day, Yr.):
 36. PLACE OF INJURY (Home, Street, Farm, etc.):
 37. CERTIFIER'S MAILING ADDRESS (Street & Number, City, State, Zip): Barry L. Bisby, Coroner, 448 Algoma Blvd, P. O. Box Oshkosh, WI 54901-2808
 38. REGISTRAR SIGNATURE: Susan D. Wisniewsky
 39. DATE RECEIVED BY REGISTRAR (M, D, Yr): FEB 10 2000
 40. HOUR OF INJURY:
 41. INJURY AT WORK:
 42. INJURY AT WORK:
 43. COUNTY:
 44. REGISTER SIGNATURE:
 45. DATE RECEIVED BY REGISTRAR (M, D, Yr): FEB 10 2000
 46. PART I. Enter the diseases, injuries or complications that caused death. Do not enter the mode of dying such as cardiac or respiratory arrest, shock or heart failure. List only one cause of death on which the Do not list and state or severity as sole cause.
 47. IF INJURY DESCRIBE HOW INJURY OCCURRED:

THIS IS TO CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF THE RECORD FILED IN THE REGISTER OF DEEDS OFFICE WINNEBAGO COUNTY, WISCONSIN.

ISSUED: NOV 03 2000 (SEAL)

Susan D. Wisniewsky
REGISTER OF DEEDS
WINNEBAGO COUNTY, WISCONSIN.

This record has a raised seal. It is illegal to copy it unless specifically authorized by Wisconsin Statute 69.24.

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND - NOT A WHITE BACKGROUND