

UNOFFICIAL COPY

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2001-01-29 09:53:39
Cook County Recorder 25.50

DECEASED JOINT
TENANCY AFFIDAVIT



0010075446

STATE OF ILLINOIS]
]]
COUNTY OF]

Ronald Palmer

being duly

sworn states that I resides at 5944 S. Artesian
in the City of Chicago

That I was acquainted Stella Hajdas her
deceased who, at the time of
Cook death, was one of the owners of the land in
County, Illinois, described as:



P.I.N. 19-13-406-036 Volume 389

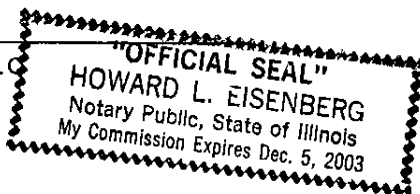
That the deceased died 3-23-99
as evidenced by a certified copy of death certificate of the
deceased attached hereto.

Subscribed and sworn to before me by the said

RONALD PALMER

this 29TH day of JAN, A.D. 2001

Howard L. Eisenberg
Notary Public



Ronald Palmer
(affiant signature)

Property of Cook County Clerk's Office

all interest in the following described Real Estate, the real estate situated in COOK County, Illinois,
commonly known as 5944 S. ARISTIDAN AVE., CHICAGO, IL 60629, (st. address) legally described as:

LOT 30 IN BLOCK 10 IN COBE AND MCKINNON'S 59TH STREET AND WESTERN AVENUE SUBDIVISION
IN SECTION 13, TOWNSHIP 38 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN
COOK COUNTY, ILLINOIS.

08619274

DEPARTMENT OF PUBLIC HEALTH

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

MAR 24 1999

SHEILA LYNE, RSM, LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILLBIRTHS AND DEATHS FOR THE CITY OF CHICAGO BY VIRTUE OF THE LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO; THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY OF A RECORD KEPT BY ME IN ORDINANCE OF SAID LAWS AND ORDINANCES.



THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

STATE FILE NUMBER

605417

MEDICAL CERTIFICATE OF DEATH

STATE OF ILLINOIS

REGISTERED DISTRICT NO. 16.10

DECEASED-NAME FIRST MIDDLE LAST
1. Stanislaw A. K.A. Stella F. Haidas
COUNTY OF DEATH Cook
4. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER Chicago

SEX Female
DATE OF BIRTH 5th AUGUST 6, 1948
DATE OF DEATH March 23, 1999
HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) Illinois Masonic Medical Center

AGE-LAST BIRTHDAY (YRS) 50
MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) WIDOWED
8b. NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) NONE
KIND OF BUSINESS OR INDUSTRY TEXTILE
11b. OFFICE CLERK
11a. OFFICE CLERK

EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) N/A
12. INSIDE CITY YES
13c. YES
COUNTY COOK
13d. COOK
13a. SOUTH ARTESIAN
13b. CHICAGO

14a. WHITE
14b. NO
14c. YES
14d. YES
MOTHER-NAME FIRST MIDDLE (MAIDEN, LAST) JANINA KOTYNIA

15. FATHER-NAME FIRST MIDDLE LAST FRANCISZEK KRUS
16. RELATIONSHIP Hospital records
17c. 836 W. Wellington Chgo, IL 60657

17a. Deborah Hampton
17b. 170 records
18. PART I. Immediate Cause (Final disease or condition resulting in death) Ovarian Carcinoma
(a) DUE TO, OR AS A CONSEQUENCE OF
(b) DUE TO, OR AS A CONSEQUENCE OF
(c) DUE TO, OR AS A CONSEQUENCE OF

19a. NO
19b. NO
19c. YES
20a. MAJOR FINDINGS OF OPERATION
20b. (DID) (DID NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON 3/22/99

21a. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.
22a. SIGNATURE Sidney Feldman
22b. DATE SIGNED 3-23-99
22c. NAME AND ADDRESS OF CERTIFIER Sidney Feldman 3000 N. Halsted St. Ste. 606 Chgo, IL 60657

22d. ILLINOIS LICENSE NUMBER 036-036975
23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)

24a. BURIAL
24b. ST. FRANCIS
24c. Necedah, Wisconsin
24d. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) MARCH 27, 1999

25a. WOLNIAK FUNERAL HOME 5700 S. PULASKI CHICAGO, IL 60629
25b. LOCAL REGISTRAR'S SIGNATURE
26a. LOCAL REGISTRAR'S SIGNATURE

26b. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) MAR 24 1999
26c. FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034-011910
26d. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) MAR 24 1999

26e. FUNERAL DIRECTOR'S SIGNATURE
26f. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) MAR 24 1999

26g. LOCAL REGISTRAR'S SIGNATURE
26h. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) MAR 24 1999

26i. LOCAL REGISTRAR'S SIGNATURE
26j. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) MAR 24 1999

26k. LOCAL REGISTRAR'S SIGNATURE
26l. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) MAR 24 1999

26m. LOCAL REGISTRAR'S SIGNATURE
26n. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) MAR 24 1999

26o. LOCAL REGISTRAR'S SIGNATURE
26p. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) MAR 24 1999

26q. LOCAL REGISTRAR'S SIGNATURE
26r. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) MAR 24 1999