



DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF COOK

Order No. R932644
2/3

RAYMOND L. DYRDA being duly sworn
states that HE resides at 123 KINGSTON PLACE in the city
of CHICAGO HEIGHTS, IL 60411.

That HE was acquainted with LOUIS MICHAEL DYRDA
deceased who, at the time of HIS death, was one of the owners of the land in COOK
County, Illinois, described as:

3P
MGT

LOT 106 IN OLYMPIA TERRACE UNIT NO. 2, A SUBDIVISION OF PART OF THE NORTH EAST
1/4 AND PART OF THE EAST 1/2 OF THE SOUTH WEST 1/4 OF SECTION 17, TOWNSHIP 35
NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Attn: Carol Faso
Heritage BK
20201 S. LaGrange Rd
Frankfort, IL 60123



That the deceased died OCTOBER 1, 1980, as evidenced
by a certified copy of death certificate of the deceased attached hereto.

That the deceased died:

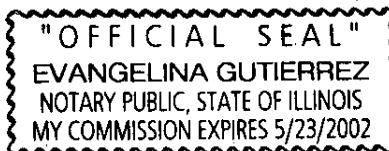
- Leaving no Last Will & Testament
- Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven will should be filed with the Clerk of the Probate Division of the Circuit Court of _____ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of _____ County, Illinois about _____.

That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of _____ dollars.

Subscribed and sworn to before me by the said

Raymond L. Dyrda
this 18th day of August A.D. 2001
Changelus Dittus
Notary Public

Raymond L. Dyrda
(Affiant's signature)



DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF COOK

Order No. _____

PAULETTE A. DYRDA

being duly sworn

states that SHE resides at 123 KINGSTON PLACE in the city of CHICAGO HEIGHTS, IL 60411.

That SHE was acquainted with LOUIS MICHAEL DYRDA deceased who, at the time of HIS death, was one of the owners of the land in COOK County, Illinois, described as:

LOT 106 IN OLYMPIA TERRACE UNIT NO. 2, A SUBDIVISION OF PART OF THE NORTH EAST 1/4 AND PART OF THE EAST 1/2 OF THE SOUTH WEST 1/4 OF SECTION 17, TOWNSHIP 35 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

That the deceased died OCTOBER 1, 1980, as evidenced by a certified copy of death certificate of the deceased attached hereto.

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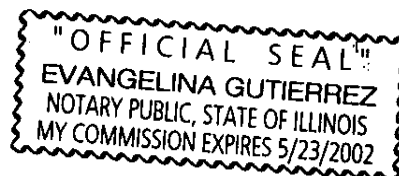
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- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of _____ County, Illinois about _____.

That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of _____ dollars.

Subscribed and sworn to before me by the said

Paulette A. Dyrda
this 18th day of August A.D. 2001
Evangelina Gutierrez
Notary Public

Paulette A. Dyrda
(Affiant's signature)



UNOFFICIAL COPY

0010800271

STATE FILE NUMBER

STATE OF ILLINOIS

MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 16.34

DECEASED - NAME: **Louis Michael Dyrda** SEX: **Male** DATE OF BIRTH: **3. October 1, 1980** COUNTY OF DEATH: **Cook**

RACE - (WHITE, BLACK, AMERICAN ORIGIN OR DESCENT) **White** AGE - (LAST SIGNIFICANT YEAR) **5b. 66** UNDER 1 YEAR: **00** UNDER 1 DAY: **00** HOURS: **00** MIN: **00** SEC: **00** DATE OF DEATH: **Aug. 21, 1980**

4b. American **5b. 66** HOSPITAL OR OTHER INSTITUTION - HANS MEMORIAL HOSPITAL - HANS MEMORIAL HOSPITAL (AFFIX ADDRESS) **7d. Inpatient**

7b. **Harvey** 7c. **Ingalls Memorial Hospital** NAME OF SURVIVING SPOUSE (NAME AND NAME, IF WIFE)

STATE OF BIRTH (IF NOT IN U.S.A. NAME COUNTRY) **Illinois** 8. **U.S.A.** 10. **Married** 11. **Amelia** 12. **355-14-2988** 13a. **spot welder** 13b. **Gen. Elec.** 13c. **yes** 13d. **M.W.I.I.** 14a. **Cook** 14b. **Cook** 14c. **Ill**

15. **Michael** 16. **Mary** 17a. **Medical Records** 17b. **None** 17c. **One Ingealls Dr. Harvey, IL. 60426**

18. **Death was caused by:** (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))

PART I. IMMEDIATE CAUSE

(a) **Cardiac arrhythmia** DUE TO, OR AS A CONSEQUENCE OF

(b) **Ischemic heart disease** DUE TO, OR AS A CONSEQUENCE OF

(c) **Coronary atherosclerosis**

PART II. OTHER SIGNIFICANT CONDITIONS (ANY THAT CONTRIBUTING TO DEATH, BUT NOT RELATED TO CAUSE GIVEN IN PART I (a))

1) **Uremia secondary to chronic pyelonephritis; 2) carcinoma of lung**

20a. MAJOR FINDINGS OF OPERATION

20b. **lung**

21. ATTENDED THE DECEASED FROM: **Sept. 11, 1980** TO: **Oct. 1, 1980** AND LAST SEEN BY HER SURVIVOR: **Oct. 1, 1980** HOUR OF DEATH: **11:20 P.M.**

21a. **Sept. 11, 1980** 21b. **Oct. 1, 1980** 21c. **Oct. 1, 1980** 21d. **11:20 P.M.**

22. SIGNATURE: **Manoach Chohan** TYPE OR PRINT: **Manoach Chohan** DATE SIGNED: **10.3.80**

22a. **Manoach Chohan** 22b. **Manoach Chohan** 22c. **Illinois License Number 36-45191**

23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT) NOTE: IF AN INQUIRY WAS INVOLVED IN THIS DEATH THE CORONER MUST BE NOTIFIED.

23a. **Manoach Chohan** 23b. **Manoach Chohan** 23c. **Illinois License Number 36-45191**

24. BURIAL: **Assumption** 24a. **Assumption** 24b. **Glenwood, Illinois** 24c. **Glenwood, Illinois** 24d. **Oct. 4, 1980**

25. **Marshall-Hub Funeral Home** 25a. **Marshall-Hub Funeral Home** 25b. **Chicago Hts, Ill** 25c. **60411**

26. LOCAL REGISTRAR'S SIGNATURE: **Walter J. Johnson** 26a. **Walter J. Johnson** 26b. **Oct. 3/1980**

26c. **10506** 26d. **Oct. 3/1980**

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named therein 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, stillbirths and deaths.

DATED **OCT 06 1980** SIGNED **Walter J. Johnson** LOCAL REGISTRAR

AT HARVEY, ILLINOIS. The original of this death record is permanently filed with the Illinois Dept. 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 Dept. of Public Health, Local Registrar or the County Clerk shall be prima facie evidence in all courts and places of the facts therein stated.