DECEASED JOINT TENANCY AFFIDAVIT

0021107780

State of Illinois)) ss.	0021107780	
County of Cook)	2257/6105 48 801 Page 1 of 8	
Joseph N. Morreale, bein	o duly sworn states the	nt she resides at 850 E. Lincoln Sucet, Mt. Prospect, Illinois 60056	
That he was acquainted with Bridget J. Morreale, deceased, who, at the time of her death, was one of the owners			
of the land in Cook Cour	nty, Illinois, described	as:	
Lots 12 and 13 in Block Township 41 North, R	k 23 in Busse's Easter ange 11, East of the T	ot 7 in Block 21, Lots 12 to 19 both inclusive in Block 22 and in Addition to Mount Prospect, in the East ½ of Section 12, third Principal Meridian in Cook County, Illinois	
Permanent Real Estat	e Index Number(s):	08-12-224-024-0000 049 16016	
Property Address: 8:	50 E. Lincoln Mount I	Prospect, Illinois 60056	
That the deceased died January 27, 2002, as evidenced by a copy of death certificate of the deceased attached hereto.			
That the deceased died:		94	
C	Leaving no Last Wil	ll and Testement	
T F I	The original of the unprobate Division of the Leaving a Last Will Box of the Probate Div Illinois, about	ed including both real and personal property owned by the deceased	
either individually or in \$ 400,000.00	n joint tenancy at the tile de	me of the death of the deceased, does not exceed the	
Affiant makes this affi Policy, describing the	davit for the purpose oabove mentioned prope	of inducing the Title Insurance Company to issue its Title Insurance erty.	
	official SEAL" VARD REDA, JR. SSION EXPIRES 04/04/05	Asseph N. Morreale'	

21107780 I HEREBY CERTIFY THAT true and correct copy of the death record and filed in accordance with the provisions of the registration of births, stillbirths and deaths JANUARY 29, 2002 DATE: SIGNED: Cook County Department of Public Health Official Chief Deputy Registrar REMOVAL SPECIFY A L VR200 (Rev. 5/89) NAME AND ADDRESS OF TO THE BEST OF MY KNOWLEDGE, DEAT! OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED INFORMANT SNAME (TYPE OR PRINT) FUNERAL HOME NAME OF ATTENDING PHY, ICIAN IF OTHER THAN CERTIFIER DATE OF OPERATION, IF ANY PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING FATHER-NAME RESIDENCE (STREET AND NUMBER) CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER REGISTRATION DISTRICT NO. 13e. Illinois SOCIAL SECURITY NUMBER COUNTY OF DEATH FOREIGNO NUMBER SIRTHPLACE (CITY AND STATE OR REGISTERED のなとくてなくと Immediate Cause (Final disease or condition esulting in death) 336-12-5636 bridget coney Funeral Home 625 850 E. ECTOR'S SIGNATURE GROVE Jook *KRENTE SCOTT, M.D OSEPh REGISTRAR Enter the diseases, or complications that caused the death. Do not en entry a mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. 13f. 6 0056 14a. し」のつつ 24b St. Joseph CEMETERY OR CREMATORY-NAME CEASED (a) SEPS (S でない つとか DUE TO, OR AS A CONSEQUENCE OF 0 VIllage Morreale MIDDLE WIDOWED DIVORCED (SPECIFY)
Ba. MARKED 11a. MAJOR FINDING SO, C. PERATION USUAL OCCUPATION UNIMANY THE INFORMAL Housewife MEDICAL CERTIFICATE . 'ON." DAY, YEAR) ? Illinois Department of Public Reach—Division of Vital Records RACE (WHITE, BLACK, AMERICAN INDUAN, #10.) (SPECIFY) HOSPITAL OR OTHER INSTITUTION NAME (IF NOT INEITHER, GIVE STREET AND NUMBER) BIRTHDAY (YRS) CANCOR DOC 145ME Morreale STREET AND NUMBER OR R Cenvetery 240 Thatcher Kdr Belmont Grove buspace DIRECT Ş lexian (TYPE OR PRINT) CITY, TOWN, TWP, OR ROAD DISTRICT NO. GUESC HWY PARK CHE GRANTIC 6000 7 25 170. Husband re 850 E. LINCOLA Mt. Prospect, IL 60056 RELATIONSHIP STATE OF ILLINOIS NAME OF SURVIVING SPOUSE (MAIDENNAME, IF WIFE) 11b. awn Home KIND OF BUSINESS OR INDUSTRY BIBRAMERS AIVED Joseph prothers rospect OF HISPÂNIC ORIGIN? (39", NF , NOOR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTORICAN, etc.) 14b. XNO ベイベン アナハラスタ EXAMINER NOTIFIED? (YESN) OF DEATH Female a January DATE OF BIRTH (MONTH, DAY, YEAR) Hospita Elementary/Secondary (0-12) MATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) October 13c VES INSIDE CITY DATE OF DEATH (MONTH, DAY, YEAR) AUTOPSY (YES/NO) 1 29 200° KNEK CTOR'S ILLINOIS LICENSE NUMBER IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? HOUR OF DEATH DATE SIGNED (BASEDO) 1989 U.S. STANDARD CERTIFICATE) NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED. 22d. ILLINOIS LICENSE NUMBER STATE FILE YES | NO | 036055833 O'Donne SO INPATIENT LPI, WEAL RM, INPATIENT (SPECIFY COUNTY (IGHEST GRADE COMPLETED)
College (1-4 or 5 +) WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (YES/NO) 1-28-02 12:50 January 29,2002 dues (MAIDEN) LAST WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO)
9. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

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(MONTH, DAY, YEAR)

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(MONTH, DAY, YEAR)

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2002

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WILL

OF

BRIDGET J. MORREALE

I, BRIDGET J. MORREALE, of Mount Prospect, Illinois, make this my Will and revoke all prior Wills and Codicils.

estate all expenses of my last illness and funeral, costs of administration including ancillary, costs of safeguarding and delivering legacies, other proper charges against my estate, and estate and inheritance taxes assessed by reason of my death, except that the amount, if any, by which the estate and inheritance taxes shall be increased as a result of the inclusion of property in which I may have a qualifying income interest for life or over which I may have a power of appointment shall be paid by the person holding or receiving that property. Interest and penalties concerning any tax shall be paid and charged in the same manner as the tax. I waive for my estate all rights of reimbursement for any payments made pursuant to this article.

My executor's selection of assets to be sold to make the foregoing payments or to satisfy any pecuniary legacies, and the tax effects thereof, shall not be subject to question by any beneficiary.

My executor shall make such elections under the tax laws as my executor deems advisable, without regard to the relative interests of the beneficiaries. No adjustment shall be

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made between principal and income or in the relative interests of the beneficiaries to compensate for the effect of elections under the tax laws made by my executor.

SECOND: My husband's name is JOSEPH N. MORREALE, and he is herein referred to as "my husband." I have four (4) children now living, namely: SHAWN MORREALE, ROBERT MORREALE, JOSEPH MORREALE, JR., and MICHAEL MORREALE. I intend by this will to provide for all my children, including any hereafter born or adopted.

THIRD: I give all my personal and household effects, automobiles, boats and collections, and any insurance policies thereon, to my husband if he survives me by thirty (30) days, otherwise to my children who so survive me to be divided equally among them as they agree. My executor shall sell any property as to which there is no agreement within sixty (60) days after admission of this Will to probate and shall add the proceeds to the residue of my estate.

FOURTH: All the residue of my estate, wherever situated, including lapsed legacies, but expressly excluding any property over which I may have power of appointment at my death, I give to my husband if he survives me, otherwise in equal shares to such of my children as shall be living at my death, except that the then living descendants of a deceased child of mine shall take per stirpes the share which the child would have received if living. If a descendant is a minor, payment may be made for the benefit of the descendant to a custodian under a

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executor without authorization by any court and, as to property subject to administration outside the state of my domicile, only with the approval of my domiciliary executor. No bond or security shall be required of any executor wherever acting. If permitted by law and if not inconsistent with the best interests of the beneficiaries as determined by my executor, the administration of my estate shall be independent of the supervision of any court.

IN WITNESS WHEREOF, I have signed this Will, consisting of five (5) pages, the following page included, and for the purpose of identification have placed my initials at the foot of each preceding page, this 3rd day of August, 1983.

Briget (). Morreale ETIDGETY J. MORREALE

We certify that the above instrument was on the date thereof signed and declared by BRIDGET J. MORREALE as her Will in our presence and that we, at her request and in her presence and in the presence of each other, have signed our names as witnesses thereto, believing BRIDGET J. MORREALE to be of sound mind and memory at the time of signing.

Carole a. Foley

Residing at 899 S. Plymouth U. Chiengo, Il 60605

Residing at 23/4 Recovered

Wilmette Jeemon

21107780

Kily Hansen

Residing at 2138 N. Kenneth

Cuccy, tu. 60636

STATE OF ILLINOIS)

COUNTY OF C O O K)

We, the attesting witnesses to the Will of BRIDGET J.

MORREALE, on oath, state that each of us was present and saw the testator sign the Will, of which this affidavit is a part, in our presence; that the Will was attested by each of us in the presence of the testator; and that each of us believed the testator to be of sound mind and memory at the time of signing.

Bridget J. Morreale

Carrle 1. Jely
Witness
Witness

Witness

Signed and sworn to before me this

Fid day of Chiques

Notary Public

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CODICIL

I, BRIDGET J. MORREALE, of Mt. Prospect, Illinois, make this Codicil to my Will dated August 3, 1983.

I hereby delete the first paragraph of Article Fifth of that Will and insert in lieu thereof:

executor of this Will. If for any reason my husband is unwilling or unable to act as an executor, I appoint my son, MICHAEL MORREALE, as executor of this Will."

In all other respects, I confirm and republish my Will dated August 3, 1983.

IN WITNESS WHEREOF, I have signed this Codicil, consisting of two (2) typewritten pages, the following page included, and for the purpose of identification have placed my initials at the foot of each preceding page, this RH day of Dicember, 1989.

Bridget J. Morreale

We certify that the above instrument was on the date thereof signed and declared by BRIDGET J. MORREALE as a Codicil to her Will dated August 3, 1983, in our presence and that we, at her request and in her presence and in the presence of each other

Palianing RRIDGET J.
have signed our names as witnesses thereto, believing BRIDGET J.
MORREALE to be of sound mind and memory at the time of signing.
Install F Tamaself Residing at 3304 N. NoRMANDI
ChicAGO, 12 60637
NORBERT P. BONDI Residing at 6634 W. FOSTER
//h/ADGO /h 6000
A DI & GRENET Posiding at 730 MCKINLEY
ARLINGTON HEIGHTS 11 COO
STATE OF ILLIEUS) SS.
COUNTY OF C O O K
We, the undersigned, being the testator and the witnesses, respectively, whose names are signed to the foregoing instrument, and being first duly sworn, do hereby declare to the undersigned authority that the testator, in the presence of witnesses, signed the instrument as a Codicil to her Last Will and that she signed willingly; and that each of the vitnesses, in the presence of the testator and in the presence of each other, signed the Codicil as a witness and that to the best of his or her knowledge the testator was at that time of legal age, of sound mind and under no constraint or undue influence. **Blidget J. Morreale** **Witness** **Market A Bonda.** Witness**
Signed and sworn to before me by BRIDGET J. MORREALE, the
Signed and sworn to before me by BRIDGET this 3th day of testator, and by each of the above witnesses, this 3th day of Notary Public
"OFFICIAL SEAL" JANE E. NELSON NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires 03/18/91 - 2 -