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0547/030 30 001 Page 1 of 3
2002-12-03 10:53:52
Cook County Recorder 28.50

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS)
) SS
COUNTY OF COOK)



HELEN POPOVICH

being duly sworn states that she resides
at 10023 S. Escanaba Avenue
in the City of Chicago, Illinois 60617.

That she was acquainted with BOJA DEJANOVICH
deceased who, at the time of her death, was one of the owners of the land in COOK
County, Illinois, described as:

SEE LEGAL DESCRIPTION ATTACHED AS EXHIBIT "A"

Permanent Tax Number:

Common Address:

26-07-159-008-0000 and

26-07-159-009-0000

10021-23 S. ESCANABA AVE., CHICAGO, IL 60617

That the deceased died December 5, 1985, as evidenced by a certified copy of death certificate of the deceased attached hereto.

That the deceased died:

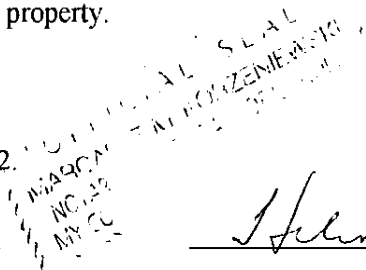
- Leaving no Last Will & Testament.
- Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven Will should be filed with the Clerk of the Probate Division of the Circuit Court of _____ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven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

Affiant makes this affidavit for that purpose of inducing the Chicago Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to before me by
the said HELEN POPOVICH
this 26th day of November, A.D. 2002.

Margaret M. Kazeminski
Notary Public



Helen Popovich
(affiant's signature)

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EXHIBIT "A"

Lot 10 and Lot 11 in Finerty's Resubdivision of the North Half of Block 5 in Notre Dame Addition to South Chicago, being a Subdivision of the South Three Quarters of Fractional Section 7, Town 37 North, Range 15, East of the Third Principal Meridian.

PIN: 26-07-159-008-0000 and
26-07-159-009-0000

Property Address: 10021-23 S. Escanaba Avenue, Chicago, Illinois 60617

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THIS CERTIFICATE IS A COPY AND NOT A COMPLETE COPY OF THE CERTIFICATE OF DEATH ON FILE WITH THE HAMMOND HEALTH DEPT.

TYPE OR PRINT
PLAINLY WITH
FADING INK
THIS IS A
PERMANENT
RECORD

Below for State Office Use

DEC - 6 1985
Date Issued
*William J. P...
HAMMOND HEALTH COMMISSIONER*

7 _____
8 _____
9 _____
10 _____
11 _____
12 _____

EMBALMER'S NAME THOMAS J. BURNS LICENSE No. 4518
FUNERAL DIRECTOR'S SIGNATURE *Thomas J. Burns* FUNERAL DIRECTOR'S LICENSE No. 2380
FUNERAL HOME No. 281

Local No. 865

INDIANA STATE BOARD OF HEALTH
MEDICAL CERTIFICATE OF DEATH

State No. _____

1 DECEASED-NAME <u>Boja</u>		2 SEX <u>Female</u>		3 DATE OF DEATH MONTH DAY YEAR <u>12-5-85</u>	
4 RACE <u>White</u>		5 AGE IN YEARS <u>88</u>		6 DATE OF BIRTH MONTH DAY YEAR <u>2/10/1897</u>	
7a CITY, TOWN OR LOCATION OF DEATH <u>Hammond</u>		7b HOSPITAL OR OTHER INSTITUTION <u>St. Margaret Hospital</u>		7c COUNTY OF DEATH <u>Lake</u>	
8 STATE OF BIRTH <u>Yugoslavia</u>		9 CITIZEN OF WHAT COUNTRY <u>U.S.A.</u>		10 MARRIED NEVER MARRIED <u>Widowed</u>	
11 SOCIAL SECURITY NUMBER <u>306-10-6765B</u>		12 USUAL OCCUPATION <u>Stone Maker</u>		13 SURVIVING SPOUSE <u>None</u>	
14 RESIDENCE-STATE <u>Illinois</u>		15a CITY, TOWN OR LOCATION <u>Chicago</u>		15b KIND OF BUSINESS OR INDUSTRY <u>Own Home</u>	
16 STREET AND NUMBER <u>10023 S. Escanaba Avenue</u>		17 IS RESIDENCE ON A FARM? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		18 INSIDE CITY LIMITS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
19 IS DECEASED OF SPANISH DESCENT? IF YES SPECIFY MEXICAN, CUBAN, PUERTO RICAN, ETC. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		20 FATHER-NAME FIRST LAST <u>John Pelnovich</u>		21 MOTHER-MAIDEN NAME FIRST LAST <u>Sophie Chelich</u>	
22 INFORMANT-NAME (Type in street address) <u>Helen Popovitch/Daughter</u>		23 MAKING ADDRESS STREET OR P.O. NO. CITY OR TOWN STATE ZIP <u>10023 S. Escanaba Ave. Chicago, Illinois 60617</u>		24 BIRTH DATE MONTH DAY YEAR <u>December 9, 1985</u>	
25 BURIAL, CREATION, REMOVAL, OTHER (Type in street address) <u>Burial - Cedar Park Cemetery</u>		26 FUNERAL HOME-NAME AND ADDRESS STREET OR P.O. NO. CITY OR TOWN STATE ZIP <u>Burns-Kish Funeral Homes, Inc. Hammond, Indiana</u>		27 DATE SIGNED MONTH DAY YEAR <u>12/6/85</u>	
28 M.D. OR D.O. <u>Dr. Nicholas F. Fehay, M.D.</u>		29 DATE SIGNED MONTH DAY YEAR <u>12/5/85</u>		30 HOUR OF DEATH <u>11:43 a.m.</u>	
31 DISPOSITION <u>Burial</u>		32 CAUSE <u>Myocardial infarction</u>		33 DATE RECEIVED BY LOCAL HEALTH OFFICER <u>DEC - 6 1985</u>	
34 PART I OTHER SIGNIFICANT CONDITIONS (Complete and carry on back of certificate) <u>Myocardial infarction</u>		35 PART II OTHER SIGNIFICANT CONDITIONS (Complete and carry on back of certificate) <u>None</u>		36 SIGNATURE OF LOCAL HEALTH OFFICER <u>Thomas J. Burns</u>	

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