

# UNOFFICIAL COPY



Doc#: 0328841142  
Eugene "Gene" Moore Fee: \$50.00  
Cook County Recorder of Deeds  
Date: 10/15/2003 02:31 PM Pg: 1 of 3

## SURVIVORSHIP AFFIDAVIT

(HI 326082

COMES NOW the affiant, Ruth Mendiola, who being first sworn and upon his/her oath and under the penalties for perjury, solemnly swears and states that:

1. He/She is the legal title owner of the real estate located at 3115 S. Rome Avey Chicago IL 60623 more particularly described as  
**SEE APPENDIX A**

2. He/She acquired title to the afore-mentioned real estate with his/his wife by Warranty Deed dated September 4, 1979 and recorded October 9, 1979 Instrument No. 25180967 in the office of the Recorder of Cook county, Indiana.

3. He/She and his/her husband/wife Francisco Mendiola held title by the entireties until the date of his/her death on August 9, 1982

4. By virtue of the operation of law in the he/she is the survivor of them, the affiant should now be shown as the sole owner of the real estate.

5. The total value of my late husband's/wife's estate, including the proceeds of life insurance, and interest in jointly owned real estate, was not large enough to be subject to federal estate tax.

Affiant makes these statements to induce the appropriate governmental authorities to cause the title to the real estate to be shown in the sole name of the affiant and that all tax records be shown accordingly.

9-2-03  
Date

Ruth Mendiola  
SIGN Print Name

STATE OF INDIANA )  
COUNTY OF LAKE ) SS: )

Before me, a Notary Public, in and for said State and County, personally appeared the affiant herein, Suzanne M. Wilkins, who acknowledged the truthfulness of the contents herein.

Done this 2 day of Sept 2003, 2001.

My Commission Expires: 11/5/09

Suzanne M. Wilkins  
Notary Public

Resident of Laurel County

Prepared by: RUTH MENPIOLA

**SUZANNE M. WILLEMS**  
Notary Public, State of Indiana  
My Commission Expires November 5, 2009

NETCO  
415 N. LASALLE  
CHICAGO, IL 60610

STATE OF ILLINOIS  
MEDICAL CERTIFICATE OF DEATH  
STATE FILE NUMBER  
616427

REGISTRATION DISTRICT NO. 16.10  
REGISTERED NUMBER

DECEASED NAME: FRANCISCO MENDIOLA  
FIRST MIDDLE LAST  
SEX: MALE  
DATE OF DEATH: AUGUST 9, 1982  
MAY 10, 1927

RACE: WHITE  
ORIGIN OR DESCENT: MEXICAN  
AGE - LAST BIRTHDAY (YRS): 55  
MOS. DAYS: 6  
MIN.: 10  
COUNTY OF DEATH: COOK

CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER: Chicago  
HOSPITAL OR OTHER INSTITUTION - NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER): MOUNT SINAI HOSPITAL MEDICAL CENTER  
IN PATIENT

STATE OF BIRTH (IF NOT IN STATE): MEXICO  
CITIZEN OF WHAT COUNTRY: MEXICO  
MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (PREV.): MARRIED  
NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE): RUTH LUNA

SOCIAL SECURITY NUMBER: 322-30-3785  
USUAL OCCUPATION: LABORER  
KIND OF BUSINESS OR INDUSTRY: CENTRAL STEEL  
U.S. WAR VETERAN: NO  
WAR OR DATES OF SERVICE: COOK ILLINOIS

RESIDENCE STREET AND NUMBER: 3115 SOUTH KOMENSKY  
CITY, TOWN, TWP. OR ROAD DISTRICT NO.: CHICAGO  
INSIDE CITY (YES/NO): YES  
COUNTY: COOK

FATHER NAME: BLAS MENDIOLA  
MOTHER - MAIDEN NAME: JOVIETA ARMENTA

INFORMANT'S SIGNATURE: Blasco Mendiolaga  
RELATIONSHIP: CLERK  
MAILING ADDRESS: 1500 S. FAIRFIELD-HOSPITAL RECORDS

DEATH WAS CAUSED BY: PULMONARY EMBOLI RIGHT LUNG  
IMMEDIATE CAUSE: (a) PULMONARY EMBOLI RIGHT LUNG  
DUE TO, OR AS A CONSEQUENCE OF: (b) CHRONIC OBSTRUCTIVE PULMONARY DISEASE  
OR AS A CONSEQUENCE OF: (c) BRONCHIAL ASTHMA

PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)  
HISTORY OF PEPTIC ULCER DISEASE  
DATE OF OPERATION: IF ANY  
MAJOR FINDINGS OF OPERATION

ATTENDED TO: AUGUST 25, 1981  
DECLARED FROM: AUGUST 9, 1982  
TO THE BEST OF MY KNOWLEDGE AND BELIEF, I BELIEVE THE CAUSE(S) STATED.

SIGNATURE: [Signature]  
NAME AND ADDRESS OF CERTIFIER: ALVARO REYES M.D., 1952 WEST CHICAGO, ILLINOIS

BURIAL, CREMATION, REMOVAL (SPECIFY):  
24a. BURIAL  
CEMETERY OR CREMATORY - NAME: ST. MARY  
LOCATION: EVERGREEN PK., ILLINOIS  
CITY OR TOWN: CHICAGO, ILLINOIS

FUNERAL DIRECTOR'S SIGNATURE: [Signature]  
FUNERAL HOME: EUDEIKIS FUNERAL HOME, 4605 S. HERMITAGE, CHICAGO, ILLINOIS 60609

LOCAL REGISTRAR'S SIGNATURE: [Signature]  
CHICAGO DEPT. OF HEALTH  
RICHARD J. DALEY CENTER, ROOM 111  
CONCOURSE LEVEL, CHICAGO 60643

ILLINOIS Department of Public Health - Office of Vital Records  
BASED ON 1978 U.S. STANDARD CERTIFICATE

August 11, 1982  
STATE OF ILLINOIS  
COUNTY OF COOK  
CITY OF CHICAGO } SS

I, Hugo H. Murriel, M.D., 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 of 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 as a record kept by me in pursuance of said laws and ordinances.

[Signature]  
LOCAL REGISTRAR

This Certified Copy VALID  
When MULTICOLOR SEAL  
And BLUE SIGNATURE ARE  
Affixed.

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LOT 11 IN BLOCK 1 IN HORACE R. HUGHES SUBDIVISION OF THE EAST 1/4 OF THE NORTH EAST 1/4 OF THE NORTH EAST 1/4 OF SECTION 34, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL # : 16-34-204-010

COMMONLY KNOWN AS: 3115 S KOMENSKY, CHICAGO, IL 60623

Property of Cook County Clerk's Office