

# UNOFFICIAL COPY



DECEASED JOINT  
TENANCY AFFIDAVIT

Doc#: 0334339128  
Eugene "Gene" Moore Fee: \$26.50  
Cook County Recorder of Deeds  
Date: 12/09/2003 01:30 PM Pg: 1 of 2

STATE OF ILLINOIS

SS

COUNTY OF COOK

I, BERNABEL BELTRAN, being duly sworn, hereby states that he resides at 814 North Racine Avenue in the City of Chicago, State of Illinois, County of Cook

That he was the husband of ANA CELIA BELTRAN, deceased who, at the time of her death, was one of the owners of the land in Cook County, Illinois, described as:

**THE SOUTH 12 FEET OF THE NORTH 100 FEET 3 INCHES OF THE EAST 42 FEET 3 INCHES OF LOTS 73,74 AND 75 (TAKEN AS A TRACT) ALSO THE EAST 52 FEET 3 INCHES LYING SOUTH OF THE NORTH 100 FEET 3 INCHES OF SAID LOTS 73,74, AND 75 (TAKEN AS TRACT) ALL IN BLOCK 26 IN THE CANAL TRUSTEES SUBDIVISION IN THE WEST HALF OF SECTION 5, TOWNSHIP 39 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN , IN COOK COUNTY, ILLINOIS.**

P.I.N. 17-05-329-056-0000 C/K/A 814 N. RACINE, CHICAGO, ILLINOIS

That the decease died, December 13, 1998.

As evidenced by a certified copy of death certificate of the deceased attached hereto.

Subscribed and sworn to before me  
by the said BERNABEL BELTRAN  
this 9th day of Jan, 2002.

  
NOTARY PUBLIC

  
BERNABEL BELTRAN

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CITY OF CHICAGO

DEC 15 1998

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 PURSUANCE OF SAID LAWS AND ORDINANCES.



THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

DISTRICT NO. 10.111

### MEDICAL CERTIFICATE OF DEATH

REGISTERED NUMBER: 620056

DECEASED-NAME: FIRST Ana, MIDDLE Celia, LAST Beltran

1. COUNTY OF DEATH: Cook

2. SEX: Female

3. DATE OF BIRTH: December 13, 1998

4. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER: Chicago

5. DATE OF DEATH: December 13, 1998

6. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY): Chicago

7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): Married

8. SOCIAL SECURITY NUMBER: 10.582-20-4403

9. USUAL OCCUPATION: Homemaker

10. RESIDENCE (STREET AND NUMBER): 814 North Racine

11. CITY, TOWN, TWP. OR ROAD DISTRICT NO.: Chicago

12. INSIDE CITY (YES/NO): Yes

13. RACE (WHITE, BLACK, AMERICAN INDIAN, etc.): Hispanic

14. MARRIAGE STATUS: Married

15. INFORMANT'S NAME (TYPE OR PRINT): Susan Rogacki

16. RELATIONSHIP: Medical Records

17. MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE ZIP): 17303 F. Superior, Chicago, IL 60611

18. PART I. Immediate Cause (Final disease or condition resulting in death): Ischemic Cardio Myopathy

19. CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST: (a) DUE TO, OR AS A CONSEQUENCE OF (b) DUE TO, OR AS A CONSEQUENCE OF (c) DUE TO, OR AS A CONSEQUENCE OF

20. DATE OF OPERATION, IF ANY: NONE

21. MAJOR FINDINGS OF OPERATION: NONE

22. SIGNATURE: Ajoy Kapoor

23. NAME AND ADDRESS OF CERTIFIER: Dr. Steven B. Newmail, 2500 North Cicero Avenue, Chicago, IL 60639

24. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY): Hillside, Illinois

25. LOCAL REGISTRAR'S SIGNATURE: Susan Alvarez