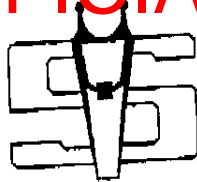


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Doc#: 0413304065
Eugene "Gene" Moore Fee: \$50.00
Cook County Recorder of Deeds
Date: 05/12/2004 10:21 AM Pg: 1 of 3



Sanctity of Contract

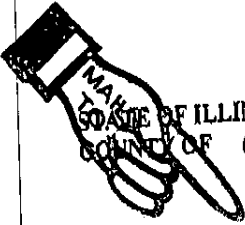
Stewart Title Company of Illinois

STEWART TITLE OF ILLINOIS
2 N. LASALLE STREET
SUITE 1820
CHICAGO, IL 60602

DECEASED JOINT TENANCY AFFIDAVIT

STCI File Number: 373567

1 of 4



STATE OF ILLINOIS
COUNTY OF Cook

SS.

Ines Pozzo
SHE

resides at 711 Penwith Ave in the City of

being duly sworn states that

ER Gene Via 712 5 0007

That she was acquainted with Roberto Pozzo deceased who, at the time of death, was one of the sworn of the land in County, Illinois, describes as:

That the deceased died 2-20-04 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 100,000 dollars.

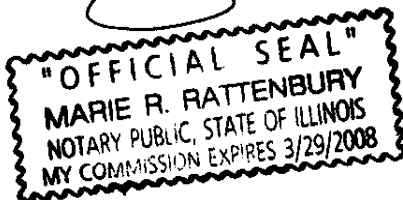
Affiant makes this affidavit for the purpose of inducing Stewart Title Company to issue its Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to before me by the said

this 27 day of April, A.D. 2004

Marie Rattenbury
Notary Public

Ines Pozzo
(Affiant's Signature)



STATE OF ILLINOIS
County of Cook

DAVID ORR, County Clerk

UNOFFICIAL COPY

FEB 23 2004

I, David Orr, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.

IN WITNESS THEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the city of Chicago, in said County.

David Orr
COUNTY CLERK

DECEDENT'S BIRTH NO.		REGISTRATION DISTRICT NO. 16.0	STATE OF ILLINOIS		STATE FILE NUMBER	
		REGISTERED NUMBER	MEDICAL CERTIFICATE OF DEATH			
Type or Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS	1. DECEASED—NAME FIRST MIDDLE LAST ROBERTO O. POZZO		2. SEX MALE	3. DATE OF DEATH (MONTH, DAY, YEAR) FEBRUARY 20, 2004		
	4. COUNTY OF DEATH COOK		AGE—LAST BIRTHDAY (YRS) MOS. DAYS 5a. 71	UNDER 1 YEAR HOURS MIN. 5b.	UNDER 1 DAY HOURS MIN. 5c.	DATE OF BIRTH (MONTH, DAY, YEAR) 5d. JANUARY 6, 1933
	6a. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER ELK GROVE VILLAGE		6b. HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) ALEXIAN BROTHERS MEDICAL CENTER		6c. IF HOSP. OR INST. INDICATE D.O.A. (OPENED OR IMPAINT) (SPECIFY) INPATIENT	
	7. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) ARGENTINA		8a. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) MARRIED	8b. NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) INES DEL BASSO		9. WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO) NO
	10. SOCIAL SECURITY NUMBER 333-46-4189		11a. USUAL OCCUPATION BUS DRIVER	11b. KIND OF BUSINESS OR INDUSTRY AUTO RENTAL	EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) 12. 12 (Elementary/Secondary (0-12) College (1-4 or 5+))	
	13a. RESIDENCE (STREET AND NUMBER) 711 Penrith Avenue		13b. CITY, TOWN, TWP. OR ROAD DISTRICT NO. ELK GROVE VILLAGE		13c. INSIDE CITY (YES/NO) YES	13d. COUNTY COOK
	13e. STATE ILLINOIS		13f. ZIP CODE 60007	14a. RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) WHITE		14b. OF HISPANIC ORIGIN? (SPECIFY NO OR YES—IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.) <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES SPECIFY: ARGENTINIAN
	15. FATHER—NAME FIRST MIDDLE LAST ROBERTO POZZO			16. MOTHER—NAME FIRST MIDDLE (MAIDEN) LAST PILAR DABALILLO		
	17a. INFORMANT'S NAME (TYPE OR PRINT) INES POZZO		17b. RELATIONSHIP WIFE	17c. MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) 711 Penrith Ave. ELK GROVE VILLAGE, IL 60007		
	18. PART I. Immediate Cause (Final disease or condition resulting in death) → CVA / stroke		Enter the diseases, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. (a) CVA / stroke DUE TO, OR AS A CONSEQUENCE OF		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST. (b) Lung Cancer DUE TO, OR AS A CONSEQUENCE OF		(c)				
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.						
20a. DATE OF OPERATION, IF ANY		20b. MAJOR FINDINGS OF OPERATION		20c. AUTOPSY (YES/NO) NO	20d. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (YES/NO) NO	
21a. (I) (DID) (DID NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON 2/20/04		21b. WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) NO		21c. HOUR OF DEATH 0530 a.m.		
22a. SIGNATURE <i>Dr. Steven Pouls</i>		22b. NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) Dr. Steven Pouls		22c. DATE SIGNED (MONTH, DAY, YEAR) 2/20/04		
22d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT) STEVEN POULS, M.D. 122 Biesterfield Rd. ELK GROVE VILLAGE, ILLINOIS 60007		22e. ILLINOIS LICENSE NUMBER 036089669		NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.		
24a. BURIAL, CREMATION, REMOVAL (SPECIFY) CREMATION	24b. CEMETERY OR CREMATORY—NAME TWIN PINES CREMATORY		24c. LOCATION DUNDEE, ILLINOIS	24d. DATE (MONTH, DAY, YEAR) FEB. 23, 2004		
25a. FUNERAL HOME NAME STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE ZIP GROVE MEMORIAL CHAPEL 1199 Arlington Hts. Road ELK GROVE VILLAGE, ILLINOIS 60007						
25b. FUNERAL DIRECTOR'S SIGNATURE <i>Anthony J. ...</i>		25c. FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034-011037		25d. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) February 23, 2004		
26a. LOCAL REGISTRAR'S SIGNATURE <i>David Orr</i>		26b. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)				

File Number: TM140932

UNOFFICIAL COPY
LEGAL DESCRIPTION

Lot 3242 in Elk Grove Village Section 10, being a subdivision in Sections 28, 29, 32 and 33, Township 41 North, Range 11, East of the Third Principal Meridian, according to the plat thereof registered in the Office of the Registrar of Titles of Cook County, Illinois, on May 22, 1961 as document number 1978779, in Cook County, Illinois.

Permanent Index Number: 08-29-405-005 (Volume number 50)

Commonly known as: 711 Penrith Avenue
Elk Grove Village IL 60007

Property of Cook County Clerk's Office