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Counselors' Title
Company, L.L.C.
Deceased Joint Tenant
Affidavit

0506135

ICIAL COPY

Doc#: 0536405140 Fee: \$28.00

Eugene "Gene" Moore

Cook County Recorder of Deeds
Date: 12/30/2005 11:49 AM Pg: 1 of 3

Now comes **Emiliana Rivera**, being duly sworn and for the purposes of inducing Counselors' Title Company, L.L.C. to delete all title exceptions caused by the death of **Angel Rivera**, states:

L.L.C. to der	ete an title exceptions caused by the death of Angel Rivera, states.
1.	That the A fiant resides at 4046 North Francisco Avenue, Chicago IL 60618;
2.	That the Affiant was acquainted with said decedent who died on \[\langle \langle a \rangle \langle a \rangle \langle a \rangle a \rangl
	the certified copy of death certificate attached hereto;
3.	That said decrease; was one of the owners of land;
	described in the subject file, or;
	legally described as follow:
Lot 4 (excen	ot the North 8 feet therof) and the North 16 feet of Lot 5 in Block 14 in Rose Park, a subdivision of the East
	outhwest 1/4 of Section 13, Township 40 North, Range 13, East of the Third Principal Meridian, in Cook
County, Illin	
	9 /
4.	That said decedent died:
	kill and Testament;
	leaving no Last will and Testament;
	leaving a Last Will and Testament, a copy of which is attached hereto;
	leaving a last Will and Testament, which was filed in the unprover will box of the Probate Division of the
	circuit Court of Cook County, IL on
5.	That the total value of the estate of said decedent, including both real and personal property owned by said
,	decedent either individually or in joint tenancy at the date of death, does not exceed \$
6.	Affiant further sayeth not.
_ ,	COUNSELORS TITLE 30. LLG
Ensi	ATT E. BUT I ERFIELD IV
Affiant Sign	ature SUITE 101
	LOMBARD, IL 60148
STATE OF	
COUNTY C	OF COOK
Subscribed a	and sworn to before me a Notary Public, by the said Affiant this day of
Novem	ber, 20 <u>05.</u>
117. 21/11	
Cal	OFFICIAL SEAL MARIA L ORTEGA
	MARIA L ORTEGA
Notary Publ	(Seal) NOTARY PUBLIC - STATE OF ILL INDIS
	MY COMMISSION EXPIRES:05/18/09

PATE FILED BY LOGY REGISTRAR (MONTH, DAY, YEAR)

26b. (BASED ON 1989 U.S. STANDARD CERTIFICATE)

/R200 (Rev. 5/89)

Illinois Department of Public Health—Division of Vital Records

M.E

LOCAL REGISTRAR'S SI

FUNERAL DIRECTOR'S SIGNATURE

THIS CERTIFICATE COPY VALID WHEN
MULTICOLOR SIGNATURE SEAL IS
AFFIXED.

FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER

CITY OF CHICAGO DEPARTMENT OF PUBLIC HEALTH

CERTIFY THAT I AM THE KEEPER OF THE CITY OF CHICAGO, DO THE REBY 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 BY VIRTUE OF THE CAWS 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 ORDINANCE OF SAID LAW AND ORDINANCES.

in the factor of the factor of

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77S,

DISTRICT NO.

NUMBER

REGISTERED

MEDICAL CERTIFICATE

OF DEATH

STATE FILE

STATE OF ILLINOIS

COUNTY OF COOK

CITY OF CHICAGO

STATE OF ILLINOIS

CONDITIONS, IF ANY
WHICH GIVE RISE TO
WHICH GIVE RISE (a)
WHICH GIVE RISE (a)
WHICH GIVE RESERVED
WHICH GIVE RESERVED
WHICH CAUSE LAST. FUNERAL HOME 20a □ ART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART t FAT NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER NAME AND ADDRESS OF CERTIFIER REMOVAL (SPECIFY) TO THE BEST OF MY KNOWLEDGE, DEATH OCCURR DATE OF OPERATION, IF ANY Ž 6a. Chicago BIRTHPLACE (CITYANDSTATEOR FOREIGN COUNTRY) COUNTY OF DEATH RESIDENCE (STREET AND NUMBER) SOCIAL SECURITY NUMBER CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER resulting in death) DECEASED-NAME isease or condition imediate Cause (Final Buria PART I. SIGNATURE > LAST SAW HIM/HER ALIVE ON Ricardo Cruz HER-NAME 582-68-4960 RMANT'S NAME (TYPE OR PRINT) Illinois Puerto Rico SHIRISH SHAH, MD 4046 N. Casey-Laskowski & Sons Jose Francisco Enter the diseases, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respirate year, sa, shock, or heart failure. List only one cause on each line. <u>≅</u> ZIP CODE CEMETERY OR CREMATORY-NAME (b) CHRONIC RENAL I DUE TO, OR AS A CONSEQUENCE OF (a) RECURRENT ASPIRATION PNEUMONIA 0 ANGE 81909 Manue FIRST MIDDLE MAJOR FINDINGS OF OPERATION MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) 11a. Machinist USUAL OCCUPATION Maryhil (TYPE OF PRINT) 5600 W. Married HLNOW NDIAN, etc. AGE-LAST BIRTHDAY (YRS) 5a. 65 AT THE TIME, DATE AND PLACE, NO LUE TO THE CAUSE(S) STATED. HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) RIVERA (WHITE, BLACK, AMERICAN 4540 ADDISCN. MIDDLE Our Lady of the Resurrection STREET AND NUMBER OF R.F.D. LAST Rivera te CITY, TOWN, TWP, OR ROAD DISTRICT NO. 2-18-0 17b. HELATIONSHIP Chicago 11b. Machine Shop Diversey KIND OF BUSINESS OR INDUSTRY NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) CHICAGO, IL 60634 Son 240 LOCATION DAYS CRUZ Emiliana Cruz LS. OF HISPANIC ORIGIN? (SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, F. 271, 3 RICAN, 8tc.) MOTHER-NAME 14b. Ave. Niles 17c. MAILING ADDRESS (STHEET AND NO. OR R.F.D., CIT) OR TOWN, STATE, ZIP) ON O CITY OR TOWN EXAMINER NOTIFIED? (YESNO) 216 4046 N. Francisco CITY OR TOWN Chicago FIRST M YES Ma le Arcadia DATE OF BIRTH (MONTH, DAY, YEAR) Illinois March | (YESNO) Yes SPECIFY: STATE (YES/NO) SIDECITY DATE OF DEATH 19a. March 19, Ö IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? Illinois NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED. DATE SIGNED 22d.036-052035 ILLINOIS LICENSE NUMBER HOUR OF DEATH Puerto Rican 1940 YES D NO D Chicago, IL 13d. HIGHEST GRADE COMPLETED)
College (1-4 or 5+) OP/EMER. RM, INPATIENT (SPECIFY) **COUNTY** 196. 3/21/05 COMPLETION OF CAUSE OF DEATH? (YES/NO) DATE (MONTH, DAY, YEAR 24d.March 11:33 A. npt. 2005 (A.JEN) LAST APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH Cook WAS DECEASED EVER IN U.S ARMED FORCES? (YES/NO) (MONTH, DAY, YEAR) (MONTH, DAY, YEAR) 60639 22,2005 60618 Z

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LEGAL DESCRIPTION

Lot 4 (except the North 8 feet therof) and the North 16 feet of Lot 5 in Block 14 in Rose Park, a subdivision of the East 1/2 of the Southwest 1/4 of Section 13, Township 40 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois.

COMMONLY KNOWN AS: 4046 North Francisco Avenue Chicago, IL 60618

PARCEL D #: 13-13-329-019-0000

Prepared by: COUNSELORS' TITLE CO. LLC 477 E. BUTTERFIELD ROAD SUITE 101 LOMBARD, IL 60148

After recording return to: EMILIANA RIVERA 4046 N. FRANCISCO AVENUE CHICAGO, IL 60618 LOMBARD, IL 60148

COUNSELORS TITLE CO., LLG
SUITE 101

ATT E. BUTTERFIELD RD.
SUITE 101

SUITE 101