

UNOFFICIAL COPY

Alliance Title - Reverse Mortgage
3005 Douglas Blvd Ste 200
Roseville, CA 95661
Phone: (800) 542-4113

Alliance Title

Return to:
Lenders First Choice
3850 Royal Ave
Simi Valley, CA 93063
65-8018180



AFFIDAVIT OF CONTINUOUS MARRIAGE (Death Certificate Attached)

Lenders First Choice File No. 8018180



Doc#: 0607912166 Fee: \$50.50
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 03/20/2006 03:27 PM Pg: 1 of 3

STATE OF ILLINOIS
County of COOK

BEFORE ME, the undersigned authority, personally appeared **PHYLLIS KAZMIERCZAK** who, after being duly sworn as required by law, deposes and says:

- That Affiant legally owns that certain real property described as follows:
The following described lot, piece or parcel of land, situate, lying and being in the County of COOK State of ILLINOIS, to-wit:
(See exhibit attached hereto)
Folio NO. 31-06-211-11-1069
- That affiant certifies that she held title to the above described property with his/her husband/wife, **Ted Kazmierczak** and that said **Ted Kazmierczak** died on January 30, 2003, as evidenced by the "Certified Copy" of said spouse's Death Certificate presented to Lenders First Choice and attached hereto.
- That affiant certifies that he/she and **Ted Kazmierczak** were husband and wife at the time of conveyance into them by deed dated November 28, 2001 and recorded 12/14/2001, reference number 0011189437 in the COOK County Records.
- That affiant certifies from the date of conveyance, of above referenced deed, He/She and **Ted Kazmierczak** remained continuously married until and including the date of **Ted Kazmierczak's** death.
- That this affidavit is made for the express purpose of inducing Lenders First Choice to issue a policy of title insurance on the above described property and made under the full apprehension of the law, with the intent that full faith and credit is to be given to the contents thereof by Lenders First Choice its agents or its attorneys.
- A "Certified Copy" of the Death Certificate is attached hereto for recording. (A copy has also been provided to Lenders First Choice).

Dated this 16 day of January, 2006.

Phyllis Kazmierczak
PHYLLIS KAZMIERCZAK

STATE OF ILLINOIS
County of COOK

The foregoing instrument was sworn to and subscribed before me this 16th day of January 30, 2006, by PHYLLIS KAZMIERCZAK who is personally known to me or who has produced drivers license(s) as identification.

(Seal or Stamp)

Jo Ann Brumby
Notary Public
My Commission Expires:
Serial No.



NO
3
yes
sc
em

DECEDENT'S BIRTH NO.

REGISTRATION DISTRICT NO. 1637
REGISTERED NUMBER 87

STATE OF ILLINOIS

STATE FILE NUMBER

UNOFFICIAL COPY
MEDICAL CERTIFICATE OF DEATH

Type or Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS

DECEASED-NAME FIRST MIDDLE LAST SEX DATE OF DEATH (MONTH, DAY, YEAR)

1. Ted Alex Kazmierczak 2. Male 3. January 30, 2003

COUNTY OF DEATH AGE-LAST BIRTHDAY (YRS) UNDER 1 YEAR MOS. DAYS UNDER 1 DAY HOURS MIN DATE OF BIRTH (MONTH, DAY, YEAR)

4. Cook 5a. 73 5b. 5c. 5d. April 21, 1929

CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) IF HOSP. OR INST. INDICATE D.O.A. OP, EMER. RM, INPATIENT (SPECIFY)

6a. Chicago Heights 6b. St. James Hospital 6c. Inpatient

BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO)

7. Chicago, IL. 8a. Married 8b. Phyllis Gwizdalski 9. No

SOCIAL SECURITY NUMBER USUAL OCCUPATION KIND OF BUSINESS OR INDUSTRY EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)

10. 334-24-6555 11a. Manager 11b. Pharmacy 12. 12

RESIDENCE (STREET AND NUMBER) CITY, TOWN, TWP, OR ROAD DISTRICT NO. INSIDE CITY (YES/NO) COUNTY

13a. 6502 Pine Trail #1 13b. Tinley Park 13c. Yes 13d. Cook

STATE ZIP CODE RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY) OF HISPANIC ORIGIN? (SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.)

13e. IL. 13f. 60477 14a. White 14b. NO YES SPECIFY:

A DECEASED

B

C

D

E

PARENTS

FATHER-NAME FIRST MIDDLE LAST MOTHER-NAME FIRST MIDDLE (MAIDEN) LAST

15. John Kazmierczak 16. Sophie Rucinski

INFORMANT'S NAME (TYPE OR PRINT) RELATIONSHIP MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP)

17a. Phyllis Kazmierczak 17b. Wife 17c. 6502 Pine Trail #1 Tinley Park, IL. 60477

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18. PART I. 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.

Immediate Cause (Final disease or condition resulting in death) (a) Hepatic-Renal Syndrome

CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) DUE TO, OF AS A CONSEQUENCE OF

(b)

(c)

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH: 4 days

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.

CAUSE

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DATE OF OPERATION, IF ANY MAJOR FINDINGS OF OPERATION

20a. 20b.

IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? 20c. YES NO

1 (DID YOU NOT ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON (MONTH, DAY, YEAR) WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) HOUR OF DEATH

21a. JAN 29, 2003 21b. NO 21c. 1:35 P.M.

TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.

22a. SIGNATURE [Signature] DATE SIGNED (MONTH, DAY, YEAR)

22b. 01-031-03

NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) ILLINOIS LICENSE NUMBER

22c. WILLIAM J. WILLIAMS, M.D. 333 DIXIE BLVD CHICAGO, ILL. 22d. 036076487

NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)

23. NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.

CERTIFIER

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BURIAL, CREMATION, REMOVAL (SPECIFY) CEMETERY OR CREMATORY-NAME LOCATION CITY OR TOWN STATE DATE (MONTH, DAY, YEAR)

24a. Burial 24b. Holy Sepulchre 24c. Worth, IL. 24d. Feb. 3, 2003

FUNERAL HOME NAME STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE ZIP

25a. Vandenberg Funeral Home 17248 S. Harlem Ave. Tinley Park, IL. 60477

FUNERAL DIRECTOR'S SIGNATURE FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER

25b. Robert D. Gillen 25c. 034-014782

LOCAL REGISTRAR'S SIGNATURE DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)

26a. Rachel M. Vega 26b. February 3, 2003

DISPOSITION

25a

25b

26a

26b

VR200 (Rev. 5/89)

Illinois Department of Public Health—Division of Vital Records

(BASED ON 1989 U.S. STANDARD CERTIFICATE)

I HEREBY CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT COPY OF THE DEATH RECORD FOR THE ABOVE NAMED IN ITEM NO. 1 AND THAT THIS RECORD WAS ESTABLISHED AND FILED IN MY OFFICE IN ACCORDANCE WITH THE PROVISIONS OF THE ILLINOIS STATUTES RELATING TO THE REGISTRATION OF BIRTHS, STILL BIRTHS & DEATHS.

DATE: FEB 03 2003 SIGNED: Rachel M. Vega

AT: CHICAGO HEIGHTS, IL 60411 TITLE: LOCAL REGISTRAR

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EXHIBIT "A"

ALL THAT CERTAIN PIECE OR PLAT OF LAND SITUATED IN THE CITY OF TINLEY PARK, COUNTY OF COOK, IN THE STATE OF ILLINOIS, DESCRIBED AS FOLLOWS, TO-WIT:

UNIT #6502-1 AND GARAGE UNIT 2, IN LOT 1 IN THE SOUTHERN PINES OF TINLEY PARK PHASE 3, BEING A SUBDIVISION OF PART OF THE NORTHEAST 1/4 OF FRACTIONAL SECTION 6, TOWNSHIP 35 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, NORTH OF THE INDIAN BOUNDARY LINE, IN RICH TOWNSHIP, COOK COUNTY, ILLINOIS, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS AS DEFINED IN THE DECLARATION OF THE SOUTHERN PINES CONDOMINIUM ASSOCIATION OF TINLEY PARK DELINEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT 9609099 AND AS AMENDED FROM TIME TO TIME.

FOR INFORMATIONAL PURPOSES ONLY: THE APN IS SHOWN BY THE COUNTY ASSESSOR AS 31-06-211-016-1069 - SOURCE OF TITLE IS DOCUMENT NO. 0011189437 (RECORDED 12/14/01)

Cook County Clerk's Office