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DECEASED JOINT TENANCY AFFIDAVIT

Doc#: 0619854095 Fee: \$50.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 07/17/2006 01:24 PM Pg: 1 of 3

STATE OF ILLINOIS)
) SS.
COUNTY OF COOK)

0605-21224

LAWRENCE ALAGNA being duly sworn state that he resides at 4641 Warsaw in the City of Lyons, that he was married to JANICE ALAGNA, deceased who at the time of her death, was one of the owners of the land in Cook County, Illinois, described as:

(see attached)

The deceased died on _____, as evidence by a certified copy of a 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 that 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 _____.

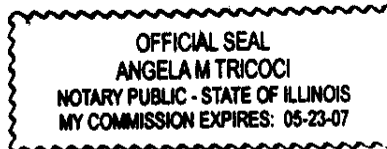
Affiant makes this affidavit for that purpose of inducing Prairie Title to issue its Title Insurance Policy, describing the above-mentioned property.

Lawrence Alagna

**PRAIRIE TITLE
6821 W. NORTH AVE,
OAK PARK, IL 60302**

SUBSCRIBED and SWORN TO
before me this 13th day of June 2006

Angela M. Tricoci
Notary Public



STATE OF ILLINOIS
County of Cook

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DAVID ORR, County Clerk

JANUARY 12, 2006

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		DECEASED-NAME FIRST MIDDLE LAST 1. Janice M. Alagna	SEX 2 Female	DATE OF DEATH (MONTH, DAY, YEAR) 3. Jan-7-2006	
A DECEASED		COUNTY OF DEATH 4. Cook	AGE-LAST BIRTHDAY (YRS) 5a. 69	UNDER 1 YEAR MOS DAYS 5b.	UNDER 1 DAY HOURS MIN 5c.
B		CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER 6a Lyons	HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) 6b. 4641 Warsaw Ave - Home		DATE OF BIRTH (MONTH, DAY, YEAR) 5d. January 21, 1936
C		BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) 7. LaCross, Wis	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) 8a. Married	NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) 8b. Lawrence Alagna	
D		SOCIAL SECURITY NUMBER 10. 393-32-2109	USUAL OCCUPATION 11a. Homemaker	KIND OF BUSINESS OR INDUSTRY 11b. Own Home	EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) Elementary/Secondary (0-12) College (1-4 or 5 +) 12. 12
E		RESIDENCE (STREET AND NUMBER) 13a. 4641 Warsaw Avenue	CITY, TOWN, TWP, OR ROAD DISTRICT NO. 13b. Lyons	INSIDE CITY (YES/NO) 13c. Yes	COUNTY 13d. Cook
PARENTS		STATE 13e. Illinois	ZIP CODE 13f. 60534	RACE (WHITE, BLACK, AMERICAN INDIAN, ASIAN, PACIFIC ISLANDER) 14a. White	OF HISPANIC ORIGIN? (SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.) 14b. X NO
		FATHER-NAME FIRST MIDDLE LAST 15. Silas Cooper	MOTHER-NAME FIRST MIDDLE (MAIDEN) LAST 16. Orpha Griffin		
		INFORMANT'S NAME (TYPE OR PRINT) 17a. Lawrence Alagna	RELATIONSHIP 17b. Husband	MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) 17c. 4641 Warsaw, Lyons, Illinois 60534	
CAUSE		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) Lung Cancer			APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH 2 months
		CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST. (b) (c)			
		PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I. Diabetes, Hypertension, Anemia			
N		DATE OF OPERATION, IF ANY 20a.	MAJOR FINDINGS OF OPERATION 20b.	AUTOPSY (Y/N) 19. No	WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (YES/NO) 19b.
P		IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? 20c. YES NO			
CERTIFIER		I (DID) (DID NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON (MONTH, DAY, YEAR) 21a. 01/07/2006		WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) 21b. No	HOUR OF DEATH 21c. 12:55 AM
		TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.		DATE SIGNED (MONTH, DAY, YEAR) 22b. 1/10/06	ILLINOIS LICENSE NUMBER 22d. 036-089590
		22a. SIGNATURE Haroon Khan M.D. NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) 22c. Joliet Rd Countryside, IL		NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.	
DISPOSITION		23. SIGNATURE Haroon Khan M.D.			
		BURIAL, CREMATION, REMOVAL (SPECIFY) 24a. Cremation	CEMETERY OR CREMATORY-NAME 24b. Parkview Funeral Directors Crematory	LOCATION CITY OR TOWN STATE 24c. Berwyn, Illinois 60402	DATE (MONTH, DAY, YEAR) 24d. Jan. 12, 2006
		25a. FUNERAL HOME NAME STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE ZIP Kopicki's Heritage Funeral Home 3117 South Oak Park Avenue Berwyn, IL 60402		FUNERAL DIRECTOR'S SIGNATURE 25b. Kevin T. Kopicki	
		25c. FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034-012134		DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) 25d. JANUARY 12, 2006	
		26a. LOCAL REGISTRAR'S SIGNATURE David Orr		26b. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)	

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A POLICY ISSUING AGENT OF
CHICAGO TITLE INSURANCE COMPANY

COMMITMENT NO. 0605-21224

SCHEDULE A
(continued)

LEGAL DESCRIPTION

LOT 34 IN OWNERS SUBDIVISION OF PART OF THE EAST 40 ACRES OF THE SOUTH 80 ACRES OF THE SOUTHWEST $\frac{1}{4}$ OF SECTION 2, TOWNSHIP 38 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING SOUTH OF THE NORTH 163 FEET AND NORTH OF THE SOUTH 153.8 FEET AND WEST OF AND PARALLEL WITH THE CENTERLINE OF A PROLONGATION OF FIRST AVENUE; ALSO THE SOUTH 80 FEET OF THE NORTH 163 FEET OF THE WEST 130 FEET OF THE EAST 40 ACRES OF THE SOUTH 80 ACRES OF THE SOUTHWEST $\frac{1}{4}$ OF SECTION 2, TOWNSHIP 38 NORTH, RANGE 12; ALSO THE WEST 33 FEET OF THE SOUTH 153.8 FEET (EXCEPT THE SOUTH 33 FEET THEREOF) OF THE EAST 40 ACRES OF THE SOUTH 80 ACRES OF THE SOUTHWEST $\frac{1}{4}$ AND WEST OF A LINE 50 FEET OF AND PARALLEL WITH THE CENTERLINE OF FIRST AVENUE, ALSO LOTS 8 TO 12 INCLUSIVE AND 17 TO 21 INCLUSIVE IN H.O. STONE AND CO.'S 8TH ADDITION, ACCORDING TO THE PLAT RECORDED FEBRUARY 27, 1956 AS DOCUMENT 16505286, IN COOK COUNTY, ILLINOIS.

PERMANENT INDEX NUMBER: 18 02 313 031 0000 VOLUME 73.