

UNOFFICIAL COPY

STATE OF ILLINOIS)

COUNTY OF COOK)



Doc#: 0831856040 Fee: \$38.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 11/13/2008 02:10 PM Pg: 1 of 2

DECEASED JOINT TENANCY
AFFIDAVIT

Antoinette Kapusta, hereinafter referred to as the affiant, states under oath that the affiant resides at 3719 N. Nottingham., in the City of Chicago, Illinois; that the affiant was acquainted with Leon Kapusta, the decedent; that at the time of death, the decedent was one of the owners of the property, by virtue of properly recorded joint tenancy warranty deed, said property located in Chicago, County of Cook, Illinois, and legally described as follows:

For Recorder Use only

The South 30 feet of the North 50 feet of Lot 7 in Block 7 in W. F. Kaiser and Co.'s Addison Heights Subdivision, being a Subdivision of the South 1/2 of the Northwest 1/4 of Section 19, Township 40 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois

Permanent Index Number (PIN): 13-19-120-014-0000
Address of Real Estate: 3719 N. Nottingham Chicago, Illinois 60634

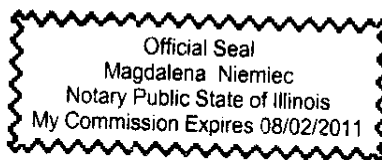
That the decedent had no interest in any business or partnership, nor held any power of appointment at death, nor created any remainder interests in property by transfer with retention of a life interest therein or the creation of interests to take effect in possession or enjoyment after death;

That the decedent died on October 19, 1987, leaving no Last Will and Testament;

Antoinette Kapusta (Seal)
Antoinette Kapusta

Subscribed and Sworn to before me
this 15th day of October, 2008

Magdalena Niemiec
Notary Public



PREPARED BY AND MAIL TO:

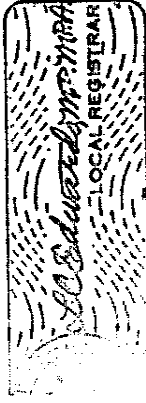
Richard S. Chelminski
5521 N. Cumberland, #1109
Chicago, Illinois 60656

2 Pm

OCT 21 1987

STATE OF ILLINOIS
 COUNTY OF COOK SS
 CITY OF CHICAGO

LORRIE C. EDWARDS M.D. M.P.A.
 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 OF 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
 IS A TRUE COPY AS A RECORD KEPT BY ME IN PURSUANCE OF
 SAID LAWS AND ORDINANCES.



THIS CERTIFIED COPY VALID
 WHEN MULTICOLOR SEAL AND
 BLUE SIGNATURE ARE AFFIXED

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH
 REGISTRATION NUMBER **16.10** STATE FILE NUMBER **620460**

1. DECEASED—NAME: **LEON KAPUSTA** SEX: **MALE** DATE OF DEATH: **OCTOBER 19, 1987**

2. PLACE OF BIRTH: **Polysth. 60.** DATE OF BIRTH: **JAN-16-1937** COUNTY OF DEATH: **Cook**

3. MARITAL STATUS: **MARRIED** NAME OF SURVIVING SPOUSE: **ANTOINETTE BEDNARSKA**

4. USUAL OCCUPATION: **FACTORY** NAME OF BUSINESS OR INDUSTRY: **JOHN F. KENNEDY MEDICAL CENTER**

5. CITIZENSHIP: **U.S.A.** NAME OF SURVIVING SPOUSE (MARRIED): **ANTOINETTE BEDNARSKA**

6. SOCIAL SECURITY NUMBER: **247-28-4439** CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER: **CHICAGO**

7. RESIDENCE: **3719 NOTTINGHAM** CITY, TOWN, TWP. OR ROAD DISTRICT NO.: **CHICAGO**

8. FATHER—NAME: **STANISLAW KAPUSTA** MOTHER—Maiden Name: **Ludwiska**

9. RELATIONSHIP: **RECORDS** MAILING ADDRESS: **17c 5645 W. ADDISON CHICAGO, ILLINOIS 60634**

10. DEATH WAS CAUSED BY: **Cardio Pulmonary Arrest**

11. IMMEDIATE CAUSE: **Cardio Pulmonary Arrest**

12. OTHER SIGNIFICANT CONDITIONS: **Abnormal Encephalogram, Hypertension, Coronary Artery Disease, Hepatocellular Carcinoma**

13. DATE OF OPERATION: **10/19/87** MAJOR FINDINGS OF OPERATION: **Coronary Artery Disease, Hypertension, Cardiac Arrest**

14. SIGNATURE: **Lorrie C. Edwards** DATE SIGNED: **10/19/87**

15. LOCAL REGISTRAR: **Lorrie C. Edwards, M.D. M.P.A.** DATE RECEIVED: **OCT 21 1987**