

UNOFFICIAL COPY

STATE OF ILLINOIS)
) SS
COUNTY OF COOK)



Doc#: 0923108159 Fee: \$44.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 08/19/2009 11:53 AM Pg: 1 of 5

**AFFIDAVIT - DEATH OF
TRUSTMAKER AND
BENEFICIARY**

JOANNE LAZZARA, of legal age, being first duly sworn, deposes and says:

1. That JOSEPHINE A. LaPORTE, the decedent mentioned in the attached certified copy of Certificate of Death, executed a Deed in Trust on March 19, 1999 which conveyed his interest in the following real estate:

Lot 23 and Lot 22 (except the East 17 feet 10 inches thereof) in Block 16 in Frank A. Mulholland's 79th Street-Cicero Avenue and Crawford Avenue Development in the West 1/2 of the South 1/4 of Section 27, Township 38 North, Range 13 East of the Third Principal Meridian, in Cook County, Illinois.

Permanent Real Estate Index Number: 19-27-316-065-0000
Address of Real Estate: 4624 West 79th Street, Chicago, IL 60652-1124

2. That JOSEPHINE A. LaPORTE conveyed their interest in the aforementioned property to the following:

JOSEPHINE A. LAPORTE, sole Trustee, or her successors in trust, under the **JOSEPHINE A. LAPORTE LIVING TRUST, dated March 16, 1999**, and any amendments thereto, of 4624 West 79th Street, Chicago, Illinois as to a 100% interest;
3. That JOSEPHINE A. LaPORTE was the Trustmaker of the JOSEPHINE A. LaPORTE LIVING TRUST dated March 16, 1999;
4. That the date of death of JOSEPHINE A. LaPORTE was June 11, 2009 (see attached copy of death certificate);
5. That the successor trustees of the JOSEPHINE A. LaPORTE LIVING TRUST are JOANNE LAZZARA and EDWARD A. LaPORTE.
6. That JOANNE LAZZARA was the daughter of JOSEPHINE A. LaPORTE;
7. That EDWARD A. LaPORTE was the son of JOSEPHINE A. LaPORTE. EDWARD A. LaPORTE died on January 4, 2009, see attached copy of death certificate.

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8. That the JOSEPHINE A. LaPORTE LIVING TRUST provides for the successor trustee to transfer any asset out of trust;

9. Therefore the current ownership of the aforementioned real estate is as follows:

JOANNE LAZZARA, sole Trustee, or her successors in trust, under the **JOSEPHINE A. LAPORTE LIVING TRUST, dated March 16, 1999**, and any amendments thereto, of 4624 West 79th Street, Chicago, Illinois.

10. That according to Article Fourteen, Section 3. of the aforementioned trust, the successor Trustee has the following powers with regard to the real estate:

u. Real Estate Powers

My Trustee may purchase, sell, transfer, exchange or otherwise acquire or dispose of any real estate.

My Trustee may make leases and grant options to lease for any term, even though the term may extend beyond the termination of any trust created under this agreement.

My Trustee may grant or release easements and other interests with respect to real estate, enter into party wall agreements, execute estoppel certificates, and develop and subdivide any real estate.

My Trustee may dedicate parks, streets, and alleys or vacate any street or alley, and may construct, repair, alter, remodel, demolish, or abandon improvements.

My Trustee may elect to insure, as it deems advisable, all actions contemplated by this subsection.

My Trustee may take any other action reasonably necessary for the preservation of real estate and fixtures comprising a part of the trust property or the income therefrom.

w. Sale, Lease, and Other Dispositive Powers

My Trustee may sell, lease, transfer, exchange, grant options with respect to, or otherwise dispose of the trust property.

My Trustee may deal with the trust property at such time or times, for such purposes, for such considerations and upon such terms, credits, and conditions, and for such periods of time, whether ending before or after the term of any trust created under this agreement, as it deems advisable.

My Trustee may make such contracts, deeds, leases, and any other instruments it deems proper under the immediate circumstances, and may deal with the trust property in all other ways in which a natural person could deal with his or her property.

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Date: August 3, 2009

[Signature]
JOANNE LAZZARA, Trustee

State of Illinois
County of Cook, ss.

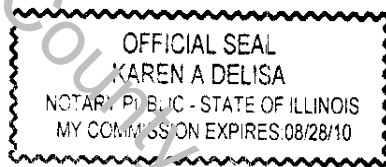
I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that JOANNE LAZZARA, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that he signed, sealed and delivered the said instrument as his free and voluntary act, for the uses and purposes therein set forth, including the release and waiver of the right of homestead.

Given under my hand and official seal, this 3rd day of August, 2009.

Commission expires August 28, 2010 Karen A. Delisa
NOTARY PUBLIC

PREPARED BY AND MAIL TO:

Stephen Sutera
4927 West 95th Street
Oak Lawn, IL 60453-2503
(708)857-7255



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CITY OF CHICAGO OFFICE OF VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2009 0032246

DATE ISSUED 06/19/2009

DECEDENT'S LEGAL NAME JOSEPHINE A LA PORTE				SEX FEMALE	DATE OF DEATH JUNE 11, 2009
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 89 YEARS		DATE OF BIRTH JUNE 08, 1920		
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME 4624 W 79TH STREET			
PLACE OF DEATH: DECEDENT'S HOME					
BIRTHPLACE ITALY	SOCIAL SECURITY NUMBER [REDACTED]	MARITAL STATUS AT TIME OF DEATH WIDOWED	SURVIVING SPOUSE'S NAME		EVER IN U.S. ARMED FORCES? NO
RESIDENCE 4624 W 79TH STREET		APT NO	CITY OR TOWN CHICAGO		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60652	FATHER'S NAME SAM LOCASCIO	MOTHER'S NAME PRIOR TO FIRST MARRIAGE FELECIA UGOLOR	
INFORMANT'S NAME JO ANNE LAZZARA		RELATIONSHIP DAUGHTER	MAILING ADDRESS 5911 W 87TH STREET, OAK LAWN, IL, 60453		
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION EVERGREEN CEMETERY		LOCATION - CITY OR TOWN AND STATE DEKALB, IL	DATE OF DISPOSITION JUNE 15, 2009	
FUNERAL HOME THOMPSON AND KUENSTER FUNERAL HOME, 5570 W. 95TH STREET, OAK LAWN, IL, 60453					
FUNERAL DIRECTOR'S NAME ROBERT BERNARD KUENSTER			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011257		
LOCAL REGISTRAR'S NAME TERRY MASON MD			DATE FILED WITH LOCAL REGISTRAR JUNE 15, 2009		
CAUSE OF DEATH					
PART I. DEMENTIA					
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a.				
	b.	Due to (or as a consequence of):			
	c.	Due to (or as a consequence of):			
PART II. Enter other <i>significant conditions contributing to death</i> but not resulting in the underlying cause given in PART I.					
				WAS AN AUTOPSY PERFORMED? NO	
				WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
DID TOBACCO USE CONTRIBUTE TO DEATH? UNKNOWN		FEMALE PREGNANCY STATUS NOT APPLICABLE		MANNER OF DEATH NATURAL	
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY		INJURY AT WORK?	
LOCATION OF INJURY					
DESCRIBE HOW INJURY OCCURRED:					
				IF TRANSPORTATION INJURY, SPECIFY:	
ATTEND THE DECEASED? NO	DATE LAST SEEN ALIVE UNKNOWN	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO		DATE PRONOUNCED	TIME OF DEATH 09:15 PM
CERTIFIER PHYSICIAN				DATE CERTIFIED JUNE 13, 2009	
NAME ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH VIRENDRA MATHUR, 4901 W 79TH STREET, BURBANK, ILLINOIS, 60459				PHYSICIAN'S LICENSE NUMBER 036075691	

APPROXIMATE
INTERVAL BETWEEN
ONSET AND DEATH

**WILL COUNTY LOCAL REGISTRAR
 JOLIET, ILLINOIS
 MEDICAL CERTIFICATE OF DEATH**

STATE FILE NUMBER 2009 0027605

DATE ISSUED 07/10/2009

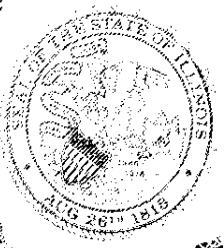
DECEDENT'S LEGAL NAME EDWARD A LAPORTE		SEX MALE	DATE OF DEATH JANUARY 04, 2009	
COUNTY OF DEATH WILL	AGE AT LAST BIRTHDAY 57 YEARS	DATE OF BIRTH OCTOBER 24, 1951		
CITY OR TOWN MOKENA		HOSPITAL OR OTHER INSTITUTION NAME 8834 CLIFTON WAY		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE EVERGREEN PARK, IL	SOCIAL SECURITY NUMBER [REDACTED]	MARITAL STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE'S NAME SUSAN KNEIP	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 8834 CLIFTON WAY		APT. NO.	CITY OR TOWN MOKENA	INSIDE CITY LIMITS? YES
COUNTY WILL	STATE IL	ZIP CODE 60443	FATHER'S NAME EDWARD LAPORTE	MOTHER'S NAME PRIOR TO FIRST MARRIAGE JOSEPHINE LOCASCIO
INFORMANT'S NAME SUSAN LAPORTE		RELATIONSHIP SPOUSE	MAILING ADDRESS 8834 CLIFTON WAY, MOKENA, IL, 60448	
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION GOOD SHEPHERD CEMETERY	LOCATION - CITY OR TOWN AND STATE ORLAND PARK, IL	DATE OF DISPOSITION JANUARY 08, 2009
FUNERAL HOME KURTZ MEMORIAL CHAPEL, 65 OLD FRANKFORT WAY, FRANKFORT, IL, 60423				
FUNERAL DIRECTOR'S NAME MATTHEW RAYMOND BECKER		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015685		
LOCAL REGISTRAR'S NAME JOHN J CICERO		DATE FILED WITH LOCAL REGISTRAR JANUARY 14, 2009		
CAUSE OF DEATH				
PART I. CANCER OF LUNG WITH METASTASIS				
IMMEDIATE CAUSE (Final disease or condition resulting in death)				
a. _____ Due to (or as a consequence of):				
b. CHRONIC OBSTRUCTIVE LUNG DISEASE				
c. NICOTINE DEPENDENCE				
Due to (or as a consequence of):				
PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.				
DID TOBACCO USE CONTRIBUTE TO DEATH? YES			FEMALE PREGNANCY STATUS NOT APPLICABLE	
DATE OF INJURY			TIME OF INJURY	PLACE OF INJURY
LOCATION OF INJURY			MANNER OF DEATH NATURAL	
DESCRIBE HOW INJURY OCCURRED:			IF TRANSPORTATION INJURY, SPECIFY:	
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE JANUARY 03, 2009	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 07:25 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED JANUARY 07, 2009	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH WIN WIN MYINT, 4700 W 95TH ST, OAK LAWN, ILLINOIS, 60453			PHYSICIAN'S LICENSE NUMBER 036081896	

THE WORD VOID APPEARS WHEN PHOTOCOPIED

055420

This is to certify that this is a true and correct copy from the official death record filed with the Illinois Department of Public Health.

John J. Cicero, M.H.A.
 John J. Cicero, M.H.A.
 Executive Director and Local Registrar
 Will County Health Department



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE