

## **DECEASED JOINT TENANCY AFFIDAVIT**

Prepared by: M L Valerius P O Box 103 Olympia Fields, IL 60461

Return to: Patricia A Faso 822 Arquilla Drive Glenwood, IL 60425

Patricia A. Faso, being duly sworn states that she esides at 822 Arquilla, Glenwood, IL 63425 That she was the spouse of Joseph R. Faso, deceased, who at the time of his death, was one of the owners of the languir COOK County, Illinois, described as:

Doc#: 0927310036 Fee: \$38.00 Eugene "Gene" Moore RHSP Fee: \$10.00 Cook County Recorder of Deeds Date: 09/30/2009 11:11 AM Pg: 1 of 2

LOT 435 IN GLENWOOD MAMOR UNIT 7, A SUBDIVISION IN THE NORTHEAST 1/4 OF SECTION 4, TOWNSHIP 35 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, AND IN THE SOUTHWEST 1/4 OF SECTION 33 TOWNSHIP 36 NORTH, RANGE 14 EAST 5 OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

Permanent Index Number(s): 32-04-112-005-0000

Property Address: 822 Arquilla Drive, Glenwood, I'. 60 125

That the deceased died February 28, 2008, as evidenced by a copy of death certificate of the deceased attached hereto.

That the deceased died:

\_\_\_\_\_ Leaving no Last Will & Testament.

\_X\_\_\_ 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 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 \$75,000.00 dollars.

Subscribed and sworn to before me by the said this 29th day of September, 2009

DTARY PUBLIC

Atricia & Tasa
(AFFIANT'S SIGNATURE)

"OFFICIAL SEAL"
MARGARET HARMS
Notary Public, State of Illinois
My Commission Expires 6/7/2012

0927310036 Page: 2 of 2

серент в вити но.	REGISTRATION 13.0	STATE OF ILLINOIS				ate file MBER
	REGISTERED NUMBER	MEDICAL CERTIFICATE OF DEATH  BEX DATEOF DEATH (MCATTH, GAY, YEAR)				
Type & Ph. 1 in per AA, 1917 MAK NO Funeral Disy there,	OCCUPACIONAL STATE	eph Robert		180 2.Male	s Augus	t 7,2004
Handbook for Histingtook for HISTINGTIG IS	COUNTY OF DEATH	AGE-LAST BIRTHDAY Sm. 61	YRS) MOB. DAY	Sc. Sd. S	EPTEMBER 2	
,	OLYMPIA FIELD	ns lebST.	JAMES HOSP	N NAME DE NOT METINEA OVE ST 8 HEALTH CENT JRYLVING SPOUSE (MAIDEN NAME)	ERS	Sc. In patient (SPECIFY)   Sc. In patient (SPECIFY)   WAS DECEASED EVER THUS. ARMED FORCES? (YES NO)
SHICEASH D	7.C 100 AL HEIGHTS. TI. SOCIAL FOU STYNUAMBER	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPEC Ba. MARRIED USUAL OCCUPATION	les PAT	ATOTA COPPOTELI	<b>T</b>	9. NO (HIGHEST GRADE COMPLETED) (Cologo (1-40rd+)
B	10. 330-34-1102 RESIDENCE (STREE AND UMBER)	110 OWNER	115 RES	TAURANT 12.	12 INSIDE CITY (YES NO)	COUNTY
£	13a 822 ARQUI LA I	PACE (WHITE BE	135. GLENWO	OD OF HISPANIC ORIGIN? (SPECI	13c YES	13d. COOK CIPY CUBAN, MEXICAN, PLERTORICAN, #0)
	130 ILL INDIS 1 H.	60425 144WHITE		14b. 10 NO TYES	SPECIFY: MIDDLE	(MAIDEN) LAST
PARENTS	15. JOSEPH		ASO RELATIONSHIP			HELSEL ENVONTOWN STATE 291 GLENWOOD IL 60425
2		he diseases, or on pications or near tellure. List only we can	17b. WIFE caused the death. Done we on each line.	17c.822 ARQU		
3	Immediate Coune (Final dispasse or condition resulting in death)	(a) ACUTE M	VOCARDI		:770NJ	DAYS
CAUSE	CONDITIONS, IF ANY	(b) CORONALA DUETO DA AS A CONSEDUENC (m) A 77/EROSCA	CY ARTO	ERY DISE VASCULAR E		YEARS YEARS
<b>4</b>	CHRONIC EVI	Industry to death but not resulting in the single of the s	rey DIG	ASE	AUTOPSY NESAHOL	IALE WAS THERE A PREGNANCY IN PAST
P	DATE OF OPERATION, IF ANY	20ь		1,03CORON	20c.	YES NO S UROFDEATH
	TO THE BEST OF MY KNOWLEDGE	>~	ME DATE AND LACE	AND DUE TO THE COUSE (F), S	OTIFIED? (YESAID) 21	TE SIGNED (MONTH, DAY, YEAR)
CERTIFIER	22a. SIGNATURE NAME AND ADDRESS OF CERTIFIE	ER (TYPE OR PRINT)	sur,		22	MOISLICENSENUMBER
	22c Gary Slick A	20201 S. Crawfo	rd Oly. Fi	elds, Il. 6046	io	16.036 - 06730 / TE: IF AN INJURY WAS INVOLVED IN THIS OTHER COTIONER OR INEDICAL EXAMINER OTHER COTIFIED.
•	Office Court Contracts	EMETERY OR CREMATORY-NA 46 ASSUMPTION CE NAME S		OCATION CITYORTOWN 24c.GLENWOOD RED. CITYOR	ILLINGIS	DATE MICHTH, DAY, YEAR) 24AUG. 12, 2004
DISPOSITION	25.6 HIRSCH-WEST END F.H., 1340 OTTO BLVO., CHICAGO HEIGHTS, ILLINOIS 6141 FUNERAL DIRECTOR'S SIGNATURE  25.6 34 -0/5508					
	LOCAL REGISTRAR'S SIGNATUR 28a.	$\cdot$ $\mathcal{M}_{\mathcal{C}_{p}}$		NP_	26b. AU	REGISTRAR (MONTH, DAY, YEAR)  6 1 1 2004  BASED ON 1969 U.S. STANDARD CERTHICATES
	VR200 (Rev. 5/89)	filingis Departmen	nt of Public Health—Di	Vision of Vital Records	ρ	and Ex Cot , and a co. of control of Co. of Co.

0928901



**County of Cook State of Illinois** 

## Office of County Clerk David Orr



This copy is not valid unless displaying embossed seals of Cook County and County Clerk signature.