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DATACHEK
55 SOUTH MAIN ST., SUITE 350
NAPERVILLE, ILLINOIS 60540
PHONE 630/696-4145 FAX: 630/839-1397

Doc#: 0933645142 Fee: \$40.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 12/02/2009 12:23 PM Pg: 1 of 3

DECEASED JOINT TENANCY AFFIDAVIT DC ORDER # D'ANGELO State of Illinois County of <u>Cook</u> , being duly sworn and for the purpose of inducing Michael J. D'Angelo DataChek, LLC to issue the subject policy covering the hardinafter described land, states as follows: That He resides at 1246 Woodside Road, LaGrange Park, IL 60526-1052 1. That He was acquainted with Lorna A. D'Angelo 2. ____, as evidenced by the attached certified copy of death certificate; June 19, 2007 That said decedent was one of the owners of the land described in the pove order number; 3. 4. That said decedent died: X Leaving no Last Will and Testament Leaving a Last Will and Testament, a copy of which is attached The total value of the estate of said decedent for State of Illinois inheritance tax and Federal estate tax 5. purposes, does not exceed \$ 600,000.00 Subscribed and Sworn to before me by the aforesaid Affiant, this 18th day November of Notary Public

"OFFICIAL SEAL

Notary Public State of Illinois My Commission Exp. 06/09/2010

Houdek

Joseph

My commission expires

DAVID ORR, County Clerk

I, David Orr, County Clerk of the County of Cook, in the Clare foresaid, an Keer er of the Records and Files of Sait 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 off be.

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.

COUNTY CLERK

ECEDENT'S BIRTH NO.	REGISTRATION 16.0		STATE OF ILLINOIS		STATE FILE NUMBER
CLD COLOR	DISTRICT NO. 16.0 MEDICAL CERTIFICATE OF DEATH				
	REGISTERED	MILDIOX		IDATE OF DE	ATH (MONTH, DAY, YEAR)
	NUMBER	FIRST MIDDLE	LAST	ISEA	IE 19, 2007
Type or Print in PERMANENT INK	DECEASED-NAME	ORNA A.	DANGELO	DATE OF BIRTH (MONTH.	DAY, YEAR)
Can Funeral Directors,	COUNTY OF DEATH	AGE-LAST	MOS. DAYS HOURS	$\frac{1}{1}$ Min. $\frac{1}{5}$ May 8, 1	956
lospital, or Physicians Handbook for	Cook	BIRTHDAY (YRS)	5b. 5c.	OT IN EITHER, GIVE STREET AND NUMBER)	IF HOSP, OR INST, INDICATE D.O.A. OP/EMER. RM, INPATIENT (SPECIFY)
INSTRUCTIONS	CITY, TOWN, TWP, OP ACAD DISTR	ICT NUMBER HOSPITAL OR UTF	rioodside Road		6c. WAS DECEASED EVER IN U.S.
	6a. LaGrange Park	6b. 1240	NAME OF SURVIVING SP	OUSE (MAIDEN NAME, IF WIFE)	ARMED FORCES? (YES/NO)
A	BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)	WIDOWED, DIVORCED (SPECIFY)	Michael	D'Angelo	9. NO
DECEASED	7 Chicago, IIIInois	8a. Married USUAL OCCUPATION	KIND OF BUSINESS OR I	NDUSTRY Elementary/Secondary (0-1	ONLY HIGHEST GRADE COMPLETED) College (1-4 or 5+)
B	SOCIAL SECURITY NUMBER	1-00	11b. Own Home	12	COUNTY
C	-4929	CITY	Y, TOWN, TWP, OR ROAD D	ISTRICT NO.	S 13d Cook
D	RESIDENCE (STREET AND NUMBER)	- Pond	LaGrange Par	ck 13c. 15	S 13d. COOLS S, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.)
E	13a. 1246 Woodside	CODE HACT () 'HITE, BLACK,	AMERICAN OF HISPAN	AICOMONA: (or zon	· ·
	STATE 21P	1. 60526 14a. (n) te	14b. 🔯		(MAIDEN) LAST
	13e. Illinois 13f	MIDDLE	MOTHER	Florence	Federici
PARENTS	Trank	Ferrarc	16.	PO OROUNE	R.F.D., CITY OR TOWN, STATE, ZIP)
	15. FEATRE	(INT)		. 1246 Woodside Rd., 1	aGrange Park, IL, Wood
			17.5 Pusband 17.	one of dying, such as cardiac or respira	tory arrest, APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
1	18. PARTI. Ente	er the diseases, or complications that cause ck, or heart failure. List only one cause o	ed the de tin. So librario man on each linc.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Smooth
2	Immediate Cause (Final	metastah	1 / 1	er Cancer	
3	disease or condition resulting in death)	DUE TO, OR AS A CONSEQUENCE OF			
	CONDITIONS, IF ANY	DOE TO, OTHER STEELS			
	WHICH GIVE RISE TO	DUE TO, OR AS A CONSEQUENCE O	F	0.	
CAUSE	IMMEDIATE CAUSE (a) STATING THE UNDERLYING	1 4-3		TAUTO	PSY WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (YESNO)
	CAUSE LAST. PART II Other significant conditions	s contributing to death but not resulting in the under	lying cause given in PART I.	(YESA) 19a.	NO 19b.
4				1194.	IF FEMALE, WAS THERE A PREGNANCY IN PAST
5	DATE OF OPERATION, IF ANY	MAJOR FINDINGS OF OPERATI	ION	(),	THREE MONTHS? 20c. YES NO
N		20b.		WAS CORONER OR MEDIC	HOUROFDEATH
Р	20a. 1(DID) (DID NOT) ATTEND THE	DECEASED (MONTH, DAY, YEAR)	γ	EXAMINEH NOTIFIED:	121c. 8 1 M.
	AND LASTSAW HIM/HER ALIVE	DGE, DEATH OCCURRED AT THE FIME.	DATE AND PLACE AND DUE	TO THE CAUSE(S) STATED.	MONTH, DAY, YEAR)
	TO THE BEST OF MY KNOWLE	DGE, DEATH OCCUPRED AT THE PIME.	170		22b. ILLINOIS LICENSE NUMBER
	222 SIGNATURE ▶	Auch	SOUTH FIRS		1 12/ -//C 3
CERTIFIE	NAME AND ADDRESS OF CER		OOD, ILLING	ois 60153	NOTE: IF AN INJURY WAS INVOLVED IN THIS
	22c. Dr. Shelly	LO MALY CIAN IF OTHER THAN CERTIFIER	(TYPEORPRINT)		DEATH THE CORONEH OR MEDICAL COMMISSION
	NAME OF ATTENDING PHYSIC	SIANTE OTTIETT TO A T		CITY OF TOWN STATE	MUST BE NOTIFIED. DATE (MONTH, DAY, YEAR)
	23.	CEMETERY OR CREMATORY-NAM	E LOCATION	d Cutoutoni	24d June 23, 2007
	BURIAL, CREMATION, REMOVAL (SPECIFY)	and of Heaven	Cemetery 24c. H1	11side, Illinois	STATE ZIP
	24a Burial FUNERAL HOME	& James Funeral Ho	EET AND NUMBER OR R.F.D.	Sth St. Country	side, IL, 60525
DISPOSITI	ON Hallowell	& James Funeral Ho	ome; 1025 W.	FUNERAL DIF	ECTOR'S ILLINOIS LICENSE NUMBER
	FUNERAL DIRECTOR'S SIGN	VATURE //	David R. S	notak locaUD4	-010071
	25h Jam 5	Amelak	David R. D	DATE EN ED E	AY LOCAL REGISTRAR (MONTH, DAT, TEATY
	LOCAL REGISTRAR'S SIGNA	ATURE /	130	26b. J	UN 2 5 2007
	26a A kind	C/3/1	of Public Health—Division of		(BASED ON 1989 U.S. STANDARD CERTIFIC
	VR200 (Rev. 5/89)	Illinois Department	ULL GODO LAGRAGO	*	•

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LEGAL DESCRIPTION

LOT 141N GEORGE V. JERUTIS ADDITION TO LAGRANGE PARK, A SUBDIVISION OF BLOCK 1

AARES, WHITE A.

JTH 1/2 OF THE SOU.

JWNSHIP 39 FORTH, RANCOUNTY, ILLING!S

COMMONLY KNOWN AS: 1246 WOOL

P.I.N.: 15-28-307-025-0000