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Doc#: 1032034005 Fee: \$42.00 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds
Date: 11/16/2010 08:47 AM Pg: 1 of 4

[Space Above Is For Recording Data]

DECEASED JOINT TENANCY AFF A70-2099 LMH

[Space Below Is Intentionally Left Blank]

PREPARED BY:

Waldemar Wyszynski 2500 E Devon, Ste 250 Des Plaines, IL 60018

RETURN TO:

Waldemar Wyszynski 2500 E Devon, Ste 250 Des Plaines, IL 60018 4

1032034005 Page: 2 of 4

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DECEASED JOINT TENANCY AFFIDAVIT

State of	File No. 410 - 2099
Mary J. Gamone Bo	eing duly sworn states that he/she resides at in the City of
That he/she was acquainted with his/her death was one of the owners of the described as:	Wip Paul Gamore, Deceased, who at the time of land in COOK County, Illinois
That the deceased dico May certificate of the Deceased attached hereto	20, 20 04 as evidence by a certified copy of death
That the Deceased died:	
Leaving no Last Will & Tes	tament.
Leaving a Last Will & Test	ar lent, a copy of which is attached hereto. The original of the ed with the Clerk of the Probate Division of the Circuit Court of
Division of the Circuit Cou	ament, which was filed in the Unproven Will Box of the Probate of County, Illinois about, 20
That the total value of the estate of the Deceased either individually or in joint tens the sum of	ceased, including both real and personal property owned by the ancy at the time of the ceath of the Deceased, does not exceed dollars.
Affiant makes this Affidavit for the purpose	TN1 (.Z.
describing the above mentioned property.	issue is the insurance i one);
Subscribed and sworn to before me this	. Zo
10 day of NOVENBEL 2010	OFFICIAL SEAL WALDEMAR WYSZYNSKI MY COMMISSION EXPIRES:02/11
Motacy Public	Affiant's Signature Affiant's Signature Affiant's Signature EXPIRES.02/14/12
Prepared by: Waldemar Wyszynski, Wys. Plaines, IL 60018.	zynski and Associates, P.C., 2500 E. Devon, Ste. 250, Des
Return To: Waldemar Wyszynski, Wyszy	rnski and Associates, P.C., 2500 E. Devon, Ste. 250, Des

Plaines, IL 60018.

A10.2099 LM#

County of Cool OFFICATION CONTROL CONT

MAY 2 1 2004

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.

and an

		•			78.1			į.	·	1
DECEDENT'S BIRTH NO.	I DEGISTRATION. , /	$\overline{\Omega}$		STATE	F ILLINOIS			-	or which his	144
	DISTRICT NO.			STATE FILE NUMBER						
	REGISTERED NUMBER		MEDICAL	CERTIF	TICATE	OF DE	ATH			
Type or Print in PERMANENT INK	DECEASED-NAME	FIRST	MIDDLE	LAS	ST	SEX	DATE	OFDEATH (MOI	NTN DAY	
See Funeral Directors, Hospital, or Physicians	1.	Phillip	Pau1	San	sone	, Male		ay 20, 2		
Handbook for INSTRUCTIONS	COUNTY OF DEATH		AGE-LAST UNDER 1 YEAR UNDER 1 DAY DATE OF BIRTH					(MONTH, DAY, YEAR)		
,omocnons	CITY, TOWN, TWP, OR P. AL	N ISTRICT III ING	5a. 80	5b.	50	MIN. 12 12 1	. L	F 10	24	
,	6a Des Plaines			OTHER INSTITUTI	ON-NAME (IFNOT IN	EITHER, GIVE STRE	ET AND NUM	BER) IF HOS	P, OR INST, INDICA ER. RM, INPATIENT	TE D.O.A.
A	BIRTHPLACE (CITY AND STAT	EOR WARRIE	O NEVERNARRIES	Westview	7 Drive			6c.	EH. HM, INPATIENT	(SPECIFY)
DECEASED	FOREIGN COUNTRY) 7. Chicago, IL	[W.DOWE	DOWED, DIVORCED (SPECIFY) (MAIDEN NAME, IF WIFE)				IF WIFE)		WAS DECEASED ARMED FORCE	DEVERINU
В	SOCIAL SECURITY NUMBER	USUA', C	II FIED	8b. Mar	y V. Len				le No	<u>-</u>
C	-0371		spector	II		E1	ry/secondary	CIFY ONLY HIGHES (0-12) Co	T GRADE COMPLETE	ED)
D	RESIDENCE (STREET AND NU	MBEA)	isper 201	TY, TOWN, TWP.	t Machin	es 12.	12 INSIDE CI		•	
€	13a. 2140 Westv	iew Drive	13	-	laines	01110.	(YES/NO)			
	STATE	ZIP CODE	RACE (WHITT, BLACK, INDIAN, etc.) (S) FOT Y	/MERICAN		IIGIN? (SPECIFYN	13c. Ye	S 13d. (Cook W. Mexican, Puerto	
5	13e.Illinois	131. 60018	14a. White		14b. ⊠ NO	☐ YES			N. MEXICAN, PUERT(DRICAN, etc
PARENTS	FATHER-NAME FIRST	MIDDLE	LAST		MOTHER-NAME		SPECIFY		(MAIDEN) LA	ST
	15. Paul		Sanso	ne	16.	Annie				
		*		RELATIONSHIP	MAILING A	DDRESS (STREET	AND NO. OR	R.F.D., CITY OR TO	Ciancio WN STATE (18)	TTE
2	17a Mary V. San			17b. Spous					Plaines,	} . TT.
3	Immediate Cause (Final	shock, or heart failur	r complications that cause e. List only one cause on	d the death. Do not each line.	erker he mode of d	ying, such as cardi	ac or respire	tory arrest,	APPROXIMATE INT BETWEEN ONSET A	TERVAL
	disease or condition	→ (a) A A	. 3 50 50 11			00.				- VOEKIN
	resulting in death)	DUETO, ORAS	A CONSEQUENCE OF	C LA >	<u>≽Wr</u>	1 (12VO	111		- 6 Mar	MI
	CONDITIONS, IF ANY WHICH GIVE RISE TO	{_(b)			•	10.				
CAUSE	IMMEDIATE CAUSE (a) STATING THE UNDERLYING	DUE TO, OR AS	A CONSEQUENCE OF			-/2				
. 1-	CAUSE LAST.	(c)							•	
4	PART II. Other significant condition	ns contributing to death b	ut not resulting in the underlying	cause given in PART I			AUTOR	SY WERE AU	TOPSY FINDINGS AVAILAB	BLEPRIOR TO
N -	DATE OF OPERATION, IF ANY	TALL LODGE	D01055555				AUTOR € ≤S/NO) 1.3a.	No 19b.	TION OF CAUSE OF DEATH	(?(YES/NO)
	20a.		IDINGS OF OPERATION						ERE A PREGNANCY I	INPAST
. >	I (DID) (DID NOT) ATTEND THE	20b.	NTH, DAY, YEAR)				2	Oc. YES	NO 🗆	
1	AND LAST SAW HIM/HER ALIVE	20/20			WA EXA	S CORONER OR I	MEDICAL	HOUHO' DE VI	Н	
	TO THE BEST OF MY KNOWLE	DGE, DEATHOCCU	RREDATTHE TIME, DAT	EAND PLACE AN	21b	o. No			:50 A	• M.
CERTIFIER	22a. SIGNATURE >	M	N-45		DOL TO THE CA	USE(S) STATED.		DATE SIGNED	(MONTH, DAY,	·-
OCT TO THE	NAME AND ADDRESS OF CERT	IFIER (TYPEO	RPRINT)					22b. 6 0	201500	4
1 -	22c.Dr. Morry Ro	tenberg,	1737 N A2*1	ington H	ts., IL ts. Rd	60004			_	\
1 '	NAME OF ATTENDING PHYSICI	AN IF OTHER THAN	CERTIFIER (TYPE	OR PRINT)				22d. 03		77
3	23. BURIAL, CREMATION,	lo						DEATH THE CORO	IY WAS INVOLVED IN NER OR MEDICAL EX	THIS CAMINER
F	HEMOVAL (SPECIFY)	Į.	REMATORY-NAME	LOCA	TION CITY	ORTOWN	STATE	. DATE		YEAR)
	24a Entombment UNERAL HOME	24b. A11		24c.	Des	Plaines,	, IL	24d.	May 24,2	2004
DISPOSITION	25a. Glueckert Fu		ne. I.td 15	NUMBER OR R.F.D.	.a. n.a. I.	CITY OR TOWN		STATE	ZIP	
"F	UNERAL DIRECTOR'S SIGNAT	UPIE\	, 200., 15	ZU II. AI	T. HLS. Kd					
_2	56. Mull		_ John W	Gluecke	ort. Ir			SILLINOIS LICENS	IE NUMBER	
Tu	OCAL REGISTRARIESIGNATUI	RE)		OZUGERE	LL, JI.)34-01	LREGISTRAR (MOI		
	6a. ▶	and l	SAM		avi	7 1	LUBTION	MAY 2 1	NIH.DAY, YEAR)	
VR	200 (Rev. 5/89)	Nlin	ois Department of Public	Health-Division	of Vital Records	26b.			S. STANDARD CERTI	EICATO:
	•							,		" TORIE!

1032034005 Page: 4 of 4

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LOT 17 IN LAKEVIEW TOWERS, UNIT NO. 1, BEING A SUBDIVISION OF THE WEST 316 FEET (AT RIGHT ANGLE MEASUREMENT), OF THE NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 29, TOWNSHIP 41 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property Index Number: 09-29-304-017-0000

Property Address: 2140 Westview Drive Des Plaines, IL 60018

Droperty of Cook County Clerk's Office