

# UNOFFICIAL COPY



Doc#: 1101110063 Fee: \$46.00  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 01/11/2011 04:27 PM Pg: 1 of 6

## DECEASED JOINT TENANCY AFFIDAVIT

State of Illinois        )  
                                  ) SS.  
County of Cook        )

Rosa Abbinanti, hereby referred to as the affiant, states under oath that the affiant resides at 4820 North Greenwood, Norridge, Illinois; that the affiant was personally acquainted with Calogero Abbinanti, the decedent; that at the time of death, the decedent was one of the owners of the property by virtue of a properly recorded joint tenancy warranty deed, said property, located in Cook County, Illinois, and legally described as follows:

PARCEL 1:  
LOT 10 IN FREDERICKSON'S RESUBDIVISION OF BLOCK 5 IN CUMBERLAND AND LAWRENCE BEING GEORGE GAUNTLET'S SUBDIVISION OF THE SOUTHEAST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 11, TOWNSHIP 40 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT OF SAID FREDRICKSON'S RESUBDIVISION REGISTERED IN THE OFFICE OF THE REGISTRAR OF TITLES OF COOK COUNTY, ILLINOIS ON NOVEMBER 29, 1965, AS DOCUMENT NO. 2244342

Permanent Real Estate Index Number(s): 12-11-306-031-0000  
Address(es) of real estate: 4820 North Greenwood, Norridge, Illinois 60706

PARCEL 2:  
LOT 37 IN VOLK BROTHERS SHAW ESTATES BEING A SUBDIVISION OF THE EAST 1/2 OF THE NORTH EAST FRACTIONAL QUARTER OF SECTION 24, TOWNSHIP 40 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Permanent Real Estate Index Number(s): 12-24-224-040-0000  
Address(es) of real estate: 3720 North Harlem, 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 4, 2001, leaving a last will and testament;

That the total value of decedent's estate, including the taxable interest in the above property was \$ \_\_\_\_\_, and that the value of the above property individually was \$ \_\_\_\_\_.

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That the Illinois Inheritance Tax and the Federal Estate Tax, if any, was due from the decedent's estate, has been paid in full;

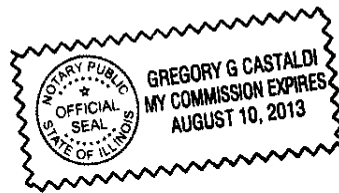
Calogero Abbinanti

1. Claims against the Estate of ~~William G. Rudy~~, the decedent.
2. Illinois State Inheritance Tax and Federal Estate Tax which may be charged against the estate of said decedent;
3. Legacies, if any, created by the will of said decedent.
4. Rights of contribution.

*Rosa Abbinanti* (SEAL)  
 \_\_\_\_\_  
 ROSA ABBINANTI

Subscribed and sworn to before me this  
 1st day of December, 2010.

*[Signature]*  
 \_\_\_\_\_  
 NOTARY PUBLIC



Prepared by:  
 Gregory G. Castaldi  
 5521 N. Cumberland  
 Suite 1109  
 Chicago, Illinois 60656

Mail to:  
 Gregory G. Castaldi  
 5521 N. Cumberland  
 Suite 1109  
 Chicago, Illinois 60656

Property of Cook County Clerk's Office

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REGISTRATION NO. 16.10  
DISTRICT NO.  
REGISTERED NUMBER

STATE OF ILLINOIS  
MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 615972  
DATE OF DEATH (MONTH, DAY, YEAR) OCTOBER 4, 2001

STATE OF ILLINOIS  
COUNTY OF COOK  
CITY OF CHICAGO  
OCT 09 2001

JOHN L. WILHELM M.D., 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 FOR 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 ON THIS SHEET IS A TRUE COPY OF A RECORD KEPT BY ME IN ORDINANCE OF SAID LAW AND ORDINANCES.

DECEASED NAME FIRST MIDDLE LAST SEX DATE OF BIRTH (MONTH, DAY, YEAR) DATE OF DEATH (MONTH, DAY, YEAR)  
CALOGERO ABBINANTI MALE MAY 6, 1936 OCTOBER 4, 2001

COUNTY OF DEATH COOK  
CITY TOWN, TWP. OR ROAD DISTRICT NUMBER CHICAGO  
HOSPITAL OR OTHER INSTITUTION NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) RESURRECTION MEDICAL CENTER  
FATHER'S NAME FIRST MIDDLE LAST RELATIONSHIP MOTHER'S NAME FIRST MIDDLE LAST  
MICHALANGELO ABBINANTI DAUGHTER ROSA ABBINANTI

RESIDENCE (STREET AND NUMBER) CITY TOWN, TWP. OR ROAD DISTRICT NO. STATE ZIP CODE  
4820 NORTH GREENWOOD NORRIDGE ILLINOIS 60706  
RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY) HISPANIC ORIGIN? (SPECIFY) NO YES  
WHITE NO

MARRIED NEVER MARRIED, DIVORCED, WIDOWED, DIVORCED (SPECIFY)  
MARRIED  
USUAL OCCUPATION LABORER  
EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) UNAVAILABLE  
INSIDE CITY YES  
COUNTY COOK

IMMEDIATE CAUSE (Final disease or condition resulting in death)  
CHRONIC RENAL FAILURE  
CHRONIC LYMPHOCYTIC LEUKEMIA  
DUE TO OR AS A CONSEQUENCE OF DUE TO OR AS A CONSEQUENCE OF

CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (A) STARTING THE UNDERLYING CAUSE LAST.  
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.  
ONGOING ISCHEMIC CARDIOMYOPATHY  
MAJOR FINDINGS OF OPERATION

DATE OF OPERATION, IF ANY DATE OF BIRTH (MONTH, DAY, YEAR) DATE OF DEATH (MONTH, DAY, YEAR)  
OCTOBER 4, 2001  
WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) NO  
HOUR OF DEATH 8:42 A.M.  
DATE SIGNED (MONTH, DAY, YEAR) OCTOBER 5, 2001  
ILLINOIS LICENSE NUMBER 036-075915

NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) NAME AND ADDRESS OF PHYSICIAN (IF OTHER THAN CERTIFIER) (TYPE OR PRINT)  
PETER A CALABRESE D.O., 240 W ADDISON, CHICAGO, ILLINOIS 60634

CEMETERY OR CREMATORY NAME LOCATION CITY OR TOWN STATE  
ALL SAINTS DESPLAINES, ILLINOIS

FUNERAL HOME NAME STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE  
CUMBERLAND CHAPELS 8300 WEAT LAWRENCE AVENUE, NORRIDGE, ILLINOIS 60706

FUNERAL DIRECTOR'S SIGNATURE DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)  
John A. Wilhelm, M.D. OCT 09 2001

LOCAL REGISTRAR'S SIGNATURE (BASED ON 1989 U.S. STANDARD CERTIFICATE)

THIS CERTIFICATE COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

ILLINOIS DEPARTMENT OF PUBLIC HEALTH - DIVISION OF VITAL RECORDS

LOCAL REGISTRAR'S SIGNATURE

DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)

BASED ON 1989 U.S. STANDARD CERTIFICATE

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## Last Will and Testament of

CALOGERO ABBINANTI

CALOGERO ABBINANTI presently residing at

3120 N. HARLEM AVE CHICAGO, ILL 60656

being of full age and sound and disposing mind and memory, hereby make, publish and declare this to be my Last Will and Testament.

FIRST: I hereby revoke any and all Wills and Codicils by me anytime heretofore made.

SECOND: I direct that all of my just debts and funeral expenses be paid out of my Estate as soon as practicable after my death.

THIRD: I am presently married to ROSA ABBINANTI

FOURTH: I hereby give, devise and bequeath all of my Estate, real, personal and mixed, of every kind and nature whatsoever and wheresoever situated, to my beloved wife absolutely and forever.

FIFTH: In the event that my wife shall predecease me, then and in that event, I give, devise and bequeath my Estate hereinabove mentioned in paragraph "FOURTH" herein, to my beloved child or children or grandchildren surviving me, per stirpes. ROSA ABBINANTI CITRANO, MICHELE ANGELO ABBINANTI, ROSARIA ABBINANTI, GUABLIARDO, MARIA ABBINANTI.

SIXTH: In the event I am not survived by my wife or any children, or grandchildren, then, and in such event, I give, devise and bequeath my said Estate to the following named beneficiary/beneficiaries or their survivor/survivors in equal shares.

a. \_\_\_\_\_  
Name and address of beneficiary

b. \_\_\_\_\_  
Name and address of beneficiary

c. \_\_\_\_\_  
Name and address of beneficiary

d. \_\_\_\_\_  
Name and address of beneficiary

e. \_\_\_\_\_  
Name and address of beneficiary

*NOT APPLICABLE*  
*NONE*

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SEVENTH: I hereby nominate and appoint my beloved wife to be the Executrix of this, my Last Will and Testament, and I direct that no bond or other security shall be required of her in any jurisdiction. If my said wife is unable to serve as Executrix, then I nominate and appoint MICHELANGELO ABBINANTI, SON Executor/Executrix of this my Last Will and Testament, and I further direct that he/she not be required to post any bond or other security.

EIGHTH: I give to my Executor/Executrix, authority to exercise all the powers, duties, rights and immunities conferred upon fiduciaries by law with full power to sell to mortgage and to lease, and to invest and re-invest all or any part of my Estate on such terms as he/she deems best.

IN WITNESS WHEREOF, I hereunto set my hand this 2<sup>ND</sup> day of MARCH, 1995.

Carlojuro Abbianti  
(SIGN HERE)

Signed, sealed, published and declared by the above named testator, as and for his Last Will and Testament, in the presence of us, who at his request, in his presence, and in the presence of one another have hereunto subscribed our names as attesting witnesses, the day and year last written above.

Anno Castellano residing at 8500 W. ST. JOSEPH AV.  
CHICAGO, ILL 60656

Anno Calini residing at 5207 Harlem Ave  
CHICAGO, ILL 60656

Antonio Tynreffie residing at 410 SUNNYSIDE  
ITASCA, ILL 60143

Vincent Alagna  
"OFFICIAL SEAL"  
VINCENT ALAGNA  
NOTARY PUBLIC, STATE OF ILLINOIS  
MY COMMISSION EXPIRES 4/28/98

SEVENTH: I hereby certify and depose that I have read the foregoing and I direct that no bond or other Executrix of this, my Last Will and Testament, and I direct that no bond or other

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STATE OF ILLINOIS )  
COUNTY OF COOK )

ss. :

On MARCH 2<sup>ND</sup> 1995 personally appeared before me, the undersigned authority

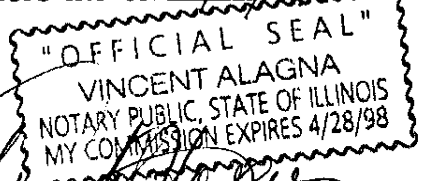
1. Calogero Abbinianti Testator  
2. Anthony Carlini Witness  
3. Emilio DeLuca Witness  
4. Bigio Amadio Witness

known to me to be the Testator and Witnesses, respectively, who being severally sworn state under oath that, all the subscribing witnesses witnessed the execution of the Will of the within named Testator on the same date they subscribed this instrument; the testator in their presence, subscribed the Will at the end and at the time of making the subscription declared the instrument to be the Testator's Last Will and Testament; at the request of the Testator and in the Testator's sight and presence and in the sight and presence of each other, all the subscribing witnesses witnessed the execution of the Will by the Testator by subscribing their names as witnesses to it; and the Testator at the time of the execution of the Will, was over the age of 18 years and appeared to them of sound mind, memory and understanding and was in all respects competent to make a Will and; the testator having declared to the said witnesses that he was not under any duress or any undue influence and that he voluntarily executed this will.

The subscribing witnesses further state that this affidavit was executed at the request of the Testator, and at the time of the execution of this affidavit the original Will, above described, was exhibited to them and they identified it as such Will by their signatures appearing on it as subscribing witnesses.

The Testator states that each witness was and is competent and of a proper age to witness a will and further acknowledges that he has read the within instrument and he affirms that each and every statement made by the subscribing witnesses is true to his own knowledge.

Severally subscribed, acknowledged and sworn to before me on 3/2/1995



[Signature]  
Notary Public of Person  
Authorized to take Oaths

TESTATOR : Calogero Abbinianti  
WITNESS : Emilio DeLuca  
WITNESS : Anthony Carlini  
WITNESS : Bigio Amadio