

UNOFFICIAL COPY

STATE OF ILLINOIS)
) SS
COUNTY OF COOK)

DECEASED JOINT TENANCY AFFIDAVIT



Doc#: 1126949026 Fee: \$40.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 09/26/2011 01:27 PM Pg: 1 of 3

HALINA SAMOLYK, being duly sworn,
states that she resides at **3121 North
Nordica Avenue**, in the City of **Chicago**,
County of Cook, State of Illinois.

That she was acquainted with
TADEUSZ SAMOLYK deceased who, at the time of his death, was one of the owners of the land in **Cook** County, Illinois,
described as: **see attached Exhibit "A"**

That the deceased died May 18, 2011 as evidence by a certified copy of death certificate of the deceased attached
hereto.

That the deceased died:

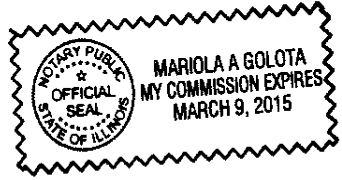
X Leaving no Last Will & Testament.

 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 Cook County, IL.

 Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the
Circuit Court of Cook County, Illinois on or 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 deceased, does not exceed the sum of **THREE HUNDRED AND
THIRTY ONE THOUSAND DOLLARS 00/100 (\$ 331,000.00)** dollars.

Halina Samolyk
(affiant's signature)



Subscribed and sworn to before me by the said
HALINA SAMOLYK
this 20th day of Sept A.D. 20 11

Mariola A. Golota

THIS INSTRUMENT WAS PREPARED BY:
MARIOLA A. GOLOTA
GOLOTA & ASSOCIATES, P.C.
5910 North Milwaukee Avenue
Chicago, Illinois 60646

*(NOTE ATTACH LEGAL DESCRIPTION & PIN # OF PROPERTY)

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EXHIBIT "A"

THE SOUTH 30 FEET OF THE NORTH 90 FEET OF LOT 6 IN BLOCK 1 IN OLIVER L. WATSON'S BELMONT AVENUE ADDITION TO CHICAGO, BEING A SUBDIVISION OF THE EAST 10 ACRES OF THE NORTH 40 ACRES AND THE NORTH 5 ACRES OF THE WEST ½ OF THE NORTH 40 ACRES AND THE SOUTH 5 ACRES OF THE NORTH 15 ACRES OF THE WEST ½ OF THE NORTH 40 ACRES ALL IN THE WEST ½ OF THE NORTHWEST ¼ OF SECTION 30, TOWNSHIP 40 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

P.I.N. # 13-30-103-029-0000

ADDRESS: 3121 NORTH NORDICA AVENUE
CHICAGO, ILLINOIS 60634

Property of Cook County Clerk's Office

CERTIFICATION OF DEATH RECORD

UNOFFICIAL COPY

COOK COUNTY CLERK VITAL RECORDS CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2011 0038183

DATE ISSUED 05/24/2011

DECEDENT'S LEGAL NAME TADEUSZ A SAMOLYK			SEX MALE	DATE OF DEATH MAY 18, 2011	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 63 YEARS	DATE OF BIRTH OCTOBER 15, 1947		
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME JOHN H. STROGER JR. HOSPITAL OF COOK CO			
PLACE OF DEATH INPATIENT					
BIRTHPLACE POLAND	SOCIAL SECURITY NUMBER [REDACTED]-8003	MARITAL STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE'S NAME HALINA CHANIEWSKI		EVER IN U.S. ARMED FORCES? NO
RESIDENCE 3121 N NORDICA		APT. NO.	CITY OR TOWN CHICAGO		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60634	FATHER'S NAME WLADYSLAW SAMOLYK		MOTHER'S NAME PRIOR TO FIRST MARRIAGE IZABELA KOTOWSKI
INFORMANT'S NAME HALINA SAMOLYK		RELATIONSHIP WIFE	MAILING ADDRESS 3121 N NORDICA, CHICAGO, IL, 60634		
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION MARY HILL CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE NILES, IL	DATE OF DISPOSITION MAY 21, 2011	
FUNERAL HOME SKAJA TERRACE FUNERAL HOME, 7812 N. MILWAUKEE AVENUE, NILES, IL, 60714					
FUNERAL DIRECTOR'S NAME ERIC JAMES SKAJA			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015022		
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR MAY 20, 2011		
CAUSE OF DEATH PART I. HEMORRHAGIC SHOCK IMMEDIATE CAUSE (Final disease or condition resulting in death) a. _____ Due to (or as a consequence of): b. INTRAABDOMINAL HEMORRHAGE _____ Due to (or as a consequence of): c. SPLENIC RUPTURE _____ 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. ANTICOAGULATION FROM PULMONARY EMBOLISM				WAS AN AUTOPSY PERFORMED? NO	
				WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
DID TOBACCO USE CONTRIBUTE TO DEATH?		FEMALE PREGNANCY STATUS NOT APPLICABLE		MANNER OF DEATH NATURAL	
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY		INJURY AT WORK?	
LOCATION OF INJURY				IF TRANSPORTATION INJURY, SPECIFY	
DESCRIBE HOW INJURY OCCURRED:					
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE MAY 18, 2011	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 01:46 AM	
CERTIFIER PHYSICIAN				DATE CERTIFIED MAY 18, 2011	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH JUAN P RUIZ, 3550 N LAKE SHORE DRIVE, CHICAGO, ILLINOIS, 60657				PHYSICIAN'S LICENSE NUMBER 125054527	

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.

David Orr
David Orr
Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

THE WORD VOID APPEARS WHEN PHOTOCOPIED

THE WORD VOID APPEARS WHEN PHOTOCOPIED