

UNOFFICIAL COPY

DECEASED JOINT TENANCY AFFIDAVIT



Doc#: 1129704145 Fee: \$38.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 10/24/2011 01:21 PM Pg: 1 of 2

STATE OF ILLINOIS)
COUNTY OF COOK)

PENELOPE VASILION being duly sworn states that she resides at 8351 S. Kedvale, Chicago, Illinois 60652.

That she was married to LEFTHER VASILION, deceased, who at the time of his death, was one of the owners of the land in Cook County, Illinois, described as follows:

Lot 5 (except the South 80 feet thereof) in Block 45 in Frederick H. Bartlett's City of Chicago Subdivision of Lots 2 and 3 in the Assessor's Subdivision of Section 34, Township 38 North, Range 13, East of the Third Principal Meridian (except that part of the East 129 feet of the West 1/2 of the Southwest 1/4 of said Section 34, as lies in said Lot 3, and except the railroad), in Cook County, Illinois.

Property Index Number: 19-34-405-035-0000

Commonly known as: 8351 S. Kedvale Ave., Chicago, IL 60652

That the deceased died MAY 15, 1993, as evidenced by a certified copy of death certificate of the deceased attached hereto.

Penelope Vasilion

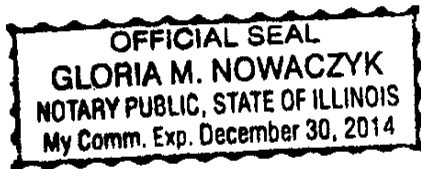
Penelope Vasilion
(affiant's signature)

Attorney's Office

S
P
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Y
N
2
X

Subscribed and sworn to before me by the said Penelope Vasilion this 29th day of September 2011.

[Signature]
Notary Public



Prepared By + Return To:

Pack Bloom LLC
105 W. ADAMS 31st Floor
CHICAGO, IL 60603

110299100037

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(STATE OF ILLINOIS)
(County of Cook)

September 22, 2011

DAVID ORR, COUNTY CLERK

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 the 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.

David D. Orr
COUNTY CLERK

DECEDENT'S BIRTH NO.		INFO STATE NO. DISTRICT NO. <u>16.0</u>		STATE OF ILLINOIS		STATE FBI NUMBER	
REGISTERED NUMBER		MEDICAL CERTIFICATE OF DEATH <u>93-032/25</u>					
Type of Print in PERMANENT FILE See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS	1. DECEASED NAME FIRST MIDDLE LAST	LEPTHER VASILION		2. SEX	3. DATE OF DEATH (MONTH DAY YEAR) <u>5 MAY 15, 1993</u>		
	4. COUNTY (NAME)	5a. AGE - LAST BIRTHDAY (YEARS MONTHS DAYS) <u>73</u>	5b. UNDER 1 YEAR	5c. UNDER 1 DAY	6. DATE OF BIRTH (MONTH DAY YEAR) <u>50 FEBRUARY 20, 1920</u>		
	7. CITY, TOWN, TWP, OR UNINCORPORATED DISTRICT NUMBER	8. HOSPITAL OR INSTITUTION NAME (IF NOT IN THE COUNTY BIRTH CERTIFICATE)			9. (IF YES, ON PAGE 1, INDICATE DOA OF UNDER THE DEPARTMENT (SPECIFY))		
	6a. OAK LAWN	6b. CHRIST HOSPITAL & MEDICAL CENTER			9c. D.O.A.		
A DECEASED	7. DAYTON, OHIO	8a. MARRIED	8b. PENILOPE KOLINS		9. YES		
	10. RETAIL MEATS	11a. SUPER MARKET		12. YES			
	13a. 8351 SO. KEDVALE	13b. CHICAGO		13c. YES			
	13c. ILLINOIS	13d. 60652	14a. WILHE		14b. (X) NO		
PARENTS	15. WILLIAM VASILION	16. EVA UNKNOWN		17. WIFE			
	17a. PENILOPE VASILION	17b. WIFE		17c. 8351 SO. KEDVALE, CHICAGO, IL. 60652			
CAUSE	18. PART I. Enter the disease, or complications that caused the death. Do not overburden by including such as fracture or respiratory arrest. (Specify only one cause on each line.)						
	(a) <u>DIAGNOSIS of LIVER</u>						
	(b) DUE TO, OR AS A CONSEQUENCE OF						
	(c) DUE TO, OR AS A CONSEQUENCE OF						
CERTIFIER	19a. NO						
	20a. DATE OF OPERATION, IF ANY						
	21a. (M) (IND) (D) (N) (A) ATTEND THE DECEASED AND LAST SAW HIM/her ALIVE ON <u>MAY 7, 1993</u>						
	21b. WAS CONDUCTED FOR MEDICAL EXAMINATION (Y) (N) <u>YES</u>						
DISPOSITION	22a. SIGNATURE <u>Auto Clava</u>						
	22b. NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) <u>ANTHONY C. HONORARIO 4340 W 95th ST, OAK LAWN</u>						
	22c. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)						
	23. BURIAL, CREMATION, REMOVAL (SPECIFY)						
24a. BURIAL							
24b. EVERGREEN PARK CEMETERY							
24c. EVERGREEN PARK, ILLINOIS							
24d. MAY 19, 1993							
25a. ROBERT J. SHEEHY & SONS FUNERAL HOME 4950 W. 79TH ST. BURNHAM, ILLINOIS 60459							
25b. <u>A.M. COLLINS</u>							
25c. 034-8877							
26a. KAREN L. SCOTT, M.D. <u>Solita Mad...</u>							
26b. <u>May 17, 1993</u>							

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S.W. 1036
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