

# UNOFFICIAL COPY



## CHICAGO TITLE INSURANCE COMPANY

### DECEASED JOINT TENANCY AFFIDAVIT

State of Illinois )  
County of COOK ) ss.  
)

Order No. \_\_\_\_\_

ROBERT S. ROMANO being duly sworn states that  
resides at 7364 LEE ST in the City of  
NILES, IL 60714

That HE was acquainted with FRANCES A. ROMANO  
deceased who, at the time of HER death, was one of the owners of the land in COOK  
County, Illinois, described as:

*See Exhibit A attached hereto and made a part hereof*

That the deceased died ON MAY 6, 2011, as evidenced  
by a certified copy of death certificate of the deceased attached hereto.

That the deceased died:

- 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 \_\_\_\_\_ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of \_\_\_\_\_ County, Illinois about \_\_\_\_\_.



Doc#: 1129950014 Fee: \$62.00  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 10/26/2011 02:59 PM Pg: 1 of 3

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 death of the deceased, does not exceed the sum of \$150,000.00 dollars.

Affiant makes this affidavit for that purpose of inducing the Chicago Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

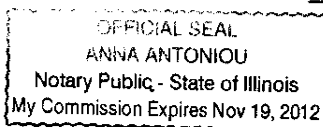
Subscribed and sworn to before me by the said

Robert S. Romano

this 26<sup>th</sup> day of OCT, A.D. 19 2011

Anna Antoniou

Notary Public



Robert S. Romano

(affiant's signature)

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

STATE FILE NUMBER 2011 0035638

DATE ISSUED 05/12/2011

DECEDENT'S LEGAL NAME FRANCES A ROMANO				SEX FEMALE	DATE OF DEATH MAY 06, 2011
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 80 YEARS		DATE OF BIRTH SEPTEMBER 09, 1930		
CITY OR TOWN NILES		HOSPITAL OR OTHER INSTITUTION NAME 7364 LEE STREET			
PLACE OF DEATH DECEDENT'S HOME					
BIRTHPLACE EVANSTON, IL	SOCIAL SECURITY NUMBER [REDACTED] 2716	MARITAL STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE'S NAME ROBERT ROMANO	EVER IN U.S. ARMED FORCES? NO	
RESIDENCE 7364 LEE STREET		APT. NO.	CITY OR TOWN NILES	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60714	FATHER'S NAME MICHELLE SAVINO	MOTHER'S NAME PRIOR TO FIRST MARRIAGE MARIA FALCONE	
INFORMANT'S NAME ROBERT ROMANO		RELATIONSHIP HUSBAND	MAILING ADDRESS 7364 LEE STREET, NILES, IL, 60714		
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION ALL SAINTS CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE DES PLAINES, IL	DATE OF DISPOSITION MAY 10, 2011	
FUNERAL HOME SKAJA TERRACE FUNERAL HOME, 7812 N. MILWAUKEE AVENUE, NILES, IL, 60714					
FUNERAL DIRECTOR'S NAME E JAMES SKAJA			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034010555		
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR MAY 11, 2011		
CAUSE OF DEATH PART I METASTATIC PANCREATIC CANCER					
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.	Due to (or as a consequence of):		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH 4 1/2 MONTHS
		b.	Due to (or as a consequence of):		
		c.	Due to (or as a consequence of):		
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I RECENT PULMONARY EMBOLISM			WAS AN AUTOPSY PERFORMED? NO		
DID TOBACCO USE CONTRIBUTE TO DEATH?			FEMALE PREGNANCY STATUS NOT APPLICABLE		WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH?
					MANNER OF DEATH NATURAL
DATE OF INJURY		TIME OF INJURY	PLACE OF INJURY		INJURY AT WORK?
LOCATION OF INJURY					
DESCRIBE HOW INJURY OCCURRED:					IF TRANSPORTATION INJURY, SPECIFY:
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE APRIL 11, 2011	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO		DATE PRONOUNCED	TIME OF DEATH 10:15 PM
CERTIFIER PHYSICIAN				DATE CERTIFIED MAY 09, 2011	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH BRUCE KADEN, 8915 W GOLF RD, NILES, ILLINOIS, 60714				PHYSICIAN'S LICENSE NUMBER 036056642	

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: FACILE SECURITY HOLOGRAPHIC FOILS AT BOTTOM

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

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==== For Recorder's Use =====

LOT TWENTY FIVE (25) in T. Breen's Subdivision, being a Subdivision of part of South Half (1/2) of the Northeast Quarter (1/4) of Section 24, Township 41 North, Range 12, East of the Third Principal Meridian and of Lots "B" and "C" in Niles Terrace-First Addition, being a Subdivision in the East Half (1/2) of the Northeast Quarter (1/4) of said Section 24, Township 41 North, Range 12, East of the Third Principal Meridian, according to Plat thereof registered in the Office of the Registrar of Titles of Cook County, Illinois on April 18, 1956, as Document Number 1664275.

Address of real estate: 7364 Lee Street, Niles, IL 60714

Permanent Index Number: 09-24-210-030-0000