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Doc#: 1207418048 Fee: \$42.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 03/14/2012 03:01 PM Pg: 1 of 3

DECEASED JOINT TENANCY AFFIDAVIT

State of IL
County of Cook ss

Wieslawa Fik
S. HADON, ARLINGTON HTS Being duly sworn states that he/she resides at 1208
in the City of Arlington HTS

That he/she was acquainted with Stanislaw Fik, Deceased, who at the time of his/her death was one of the owners of the land in Cook County, Illinois described as:
1208 S. HADON, Arlington HTS IL 60005

That the deceased died August 26, 2004 as evidence 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 _____, 20__.

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 \$100,000 dollars.

Affiant makes this Affidavit for the purpose of inducing N/A to issue its Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to before me by Wieslawa Fik

this 8TH day of MARCH, 2012.

[Signature]
Notary Public



Wieslawa Fik
Affiant's Signature

Prepared by and Return to:

Wyszynski and Associates, P.C., 2500 E. Devon, Ste. 250, Des Plaines, IL 60018.

101222

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PERMANENT CERTIFICATE
 TEMPORARY CERTIFICATE

REGISTRATION DISTRICT NO. **45.0**
 REGISTERED NUMBER

STATE OF ILLINOIS

STATE FILE NUMBER

MEDICAL EXAMINER'S - CORONER'S CERTIFICATE OF DEATH

Type, or Print in PERMANENT INK See Coroner's or Funeral Directors Handbook for INSTRUCTIONS

A DECEASED

B

C

D

E

PARENTS

CAUSE

N

P

H.G.

RIF

UNK

CERTIFIER

DISPOSITION

DECEASED - NAME: **Stanislaw Fik** SEX: **Male** DATE OF DEATH: **August 26, 2004**

CITY OF DEATH: **Kane** AGE - LAST BIRTHDAY (Y/M/D): **51** UNDER 1 YEAR: **5b.** UNDER 1 DAY: **5c.** DATE OF BIRTH: **March 1, 1953**

CITY, TWP. OR ROAD DISTRICT NUMBER: **6a. Elgin** HOSPITAL OR OTHER INSTITUTION: **6b. Sherman Hospital** IF HOSP. OR INST. INDICATED O.A. OF EMER. RM. INPATIENT? (SPECIFY): **6c. Emergency Room**

BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY): **7. Poland** MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): **8a. Married** NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE): **8b. Wieslawa Koltowski** WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO): **9. No**

SOCIAL SECURITY NUMBER: **10. 340-70-6721** USUAL OCCUPATION: **11a. Truck Driver** KIND OF BUSINESS OR INDUSTRY: **11b. Trucking** EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED): **12. 12** (College 11-4 or 5 +)

RESIDENCE (STREET AND NUMBER): **13a. 1208 S. Haddow** CITY, TWP. OR ROAD DISTRICT NO.: **13b. Arlington Heights** INSIDE CITY (YES/NO): **13c. Yes** COUNTY: **13d. Cook**

STATE: **13e. Illinois** ZIP CODE: **13f. 60005** RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY): **14a. White** OF HISPANIC ORIGIN? (SPECIFY NO OR YES - IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.): **14b. X NO** YES SPECIFY:

FATHER - NAME FIRST MIDDLE LAST: **15. Wladyslaw Fik** MOTHER - NAME FIRST MIDDLE (MAIDEN) LAST: **16. Anna Szpineta**

INFORMANT'S NAME, TYPE OR PRINT: **17a. Wieslawa Fik** RELATIONSHIP: **17b. Wife** MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP): **17c. 1208 S. Haddow, Arlington Heights, IL 60005**

18. PART I. Enter the disease, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

Immediate Cause (Final disease or condition resulting in death) **(a) Blunt Laceration of the Leg**
 DUE TO, OR AS A CONSEQUENCE OF

CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST. **(b) Multiple Motor Vehicle Mishap**
 DUE TO, OR AS A CONSEQUENCE OF

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.

NATURAL ACCIDENT, HOMICIDE, SUICIDE, UNDETERMINED, (SPECIFY): **20a. Reckless Homicide** DATE OF INJURY (MONTH, DAY, YEAR): **20b. Aug. 26, 2004** HOUR: **20c. 12:06 P.** HOW INJURY OCCURRED (ENTER NATURE OF INJURY MENTIONED IN PART I OR PART II, ITEM 18): **20d. Driver, Multi-Vehicle Mishap**

INJURY AT WORK (YES/NO): **20e. No** PLACE OF INJURY (AT HOME, FARM, STREET, FACTORY, OFFICE BUILDING, ETC.) (SPECIFY): **20f. Tollway** LOCATION (CITY, VIL. OR TWP. OR TWP. OR RD. DIST. NO., COUNTY, STATE): **20g. Dundee Twp/Kane/Illinois** IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? **20h. YES** NO

I CERTIFY THAT IN MY OPINION BASED UPON MY INVESTIGATION AND/OR THE INQUIRY, THIS DEATH OCCURRED ON THE DATE, AT THE PLACE AND DUE TO THE CAUSE(S) STATED, AND THAT

THE DECEASED WAS PRONOUNCED DEAD ON: **21b. August 26, 2004** AT: **21c. 11:51 P. M.**

CORONER'S - MEDICAL EXAMINER'S SIGNATURE: **22a. [Signature]** DATE SIGNED (MONTH, DAY, YEAR): **22b. October 13, 2004**

CORONER'S PHYSICIAN'S NAME (Type or Print): **23a. Bryan Mitchell, M.D.** DATE SIGNED (MONTH, DAY, YEAR): **23b. October 13, 2004**

BURIAL, CREMATION, REMOVAL (SPECIFY): **24a. Burial** CEMETERY OR CREMATORY - NAME: **24b. St. Adalbert Cemetery** LOCATION: **24c. Niles, Illinois** DATE (MONTH, DAY, YEAR): **24d. Sept. 1, 2004**

FUNERAL HOME: **25a. Colonial-Wojciechowski Funeral Home, 6250 N. Milwaukee, Chicago, IL 60646** FUNERAL DIRECTOR'S SIGNATURE: **25b. Edward J. Madura, Jr.** FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER: **25c. 034-010057**

LOCAL REGISTRAR'S SIGNATURE: **26a. John A. Cunningham / Sharon T. Goodman** DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR): **26b. October 13, 2004**

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STATE OF ILLINOIS)
COUNTY OF KANE) SS

CERTIFIED COPY OF VITAL RECORDS

OCT 13 2004

DATE ISSUED

[Signature]

JOHN A. CUNNINGHAM
KANE COUNTY CLERK



This is a true and exact reproduction of the document officially registered and placed on file in the office of the County Clerk, Kane County, Geneva, Illinois

(BASED ON 1969 U.S. STANDARD CERTIFICATE)

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QUIT CLAIM DEED

GRANTOR(S):

WIESLAWA FIK
a widow and not since remarried
nor a party to a civil union

PRESENTLY RESIDING AT:
1208 S. Haddow
Arlington Heights, IL 60005

(The Above Space For Recorder's Use Only)
for and in consideration of Ten Dollars (\$10.00) and other good and valuable consideration in hand paid, CONVEY(S) and QUIT CLAIM(S) to:

**AN UNDIVIDED 66% INTEREST IN WIESLAWA FIK
AND
AN UNDIVIDED 34% INTEREST WLODZIMIERZ GANCARZ AND MONIKA GANCARZ WHO ARE HOLDING
THEIR INTEREST AS JOINT TENANTS**

the following described Real Estate situated in the State of Illinois, to wit:

LEGAL DESCRIPTION: LOT 3 IN BLOCK 10 IN FEURBORN AND KLODES ARLINGTON MANOR BEING A SUBDIVISION OF PART OF THE WEST HALF OF THE NORTHWEST QUARTER OF SECTION 10 AND PART OF THE NORTHEAST QUARTER OF SECTION 9, TOWNSHIP 41 NORTH, RANGE 11, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

P.I.N.: 08-10-110-013-0000

PROPERTY ADDRESS: 1208 S. HADDOW, ARLINGTON HEIGHTS, IL 60005

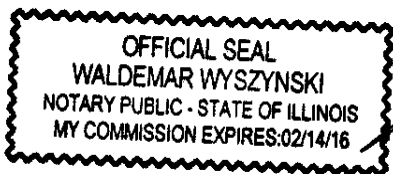
Hereby releases and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois.

DATED this PH day of MARCH, 2012.

Wieslawa Fik
Wieslawa Fik

STATE OF ILLINOIS, COUNTY OF COOK) SS: I, the undersigned, a notary public in and for the said County, in the State aforesaid, DO HEREBY CERTIFY that the above person(s), Wieslawa Fik, personally known to me to be the same person(s) whose name is subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that s/he signed, sealed and delivered the said instrument as his/her free and voluntary act, for the uses and purposes therein set forth, including the release and waiver of the right of homestead.

GIVEN UNDER MY HAND AND OFFICIAL SEAL, this PH day of MARCH, 2012



[Signature]
Notary Public

RN 2012