

# UNOFFICIAL COPY



Doc#: 1215833173 Fee: \$42.00  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 06/06/2012 02:36 PM Pg: 1 of 3

*O'Connor Title Guaranty, Inc.*

## DECEASED JOINT TENANT AFFIDAVIT

FILE NUMBER: FA-12-0167

STATE OF ILLINOIS                    }  
  } SS  
COUNTY OF COOK                    }

ESTHER BANICKI, being duly sworn states that she resides at 2437 Nona Street, in the City of Franklin Park.

That the undersigned was acquainted with **RICHARD BANICKI**, deceased, who at the time of his/her death, was one of the owners of the real estate described in the title insurance commitment reference above, commonly known as 2437 Nona Street, Franklin Park, IL 60131.

The deceased died on **MARCH 11, 2000**, as evidenced by a certified copy of death certificate of the deceased attached hereto.

That the deceased died:

- Leaving no Last Will and Testament
- Leaving a Last Will and 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, Illinois.
- Leaving a Last Will and Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of Cook, Illinois.

That the total value of the estate of the deceased, including both real estate 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 \$750,000.00.

12158-68

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Affiant makes this affidavit for that purpose of inducing O'Connor Title Guaranty, Inc. and its underwriter(s) to issue its Title Insurance Policy, describing the above mentioned property.

*Esther Banicki*

Esther Banicki  
Affiant's Signature

Sworn and subscribed this 1 day of June, 2012



*[Signature]*  
Notary Signature

LEGAL DESCRIPTION:

LOT 15 IN ROSE MANOR, A SUBDIVISION OF THE EAST 923.88 FEET OF THE NORTH HALF OF THE SOUTH HALF OF THE SOUTHEAST QUARTER OF THE SOUTHEAST QUARTER (EXCEPT THE EAST 50 FEET THEREOF) AND (EXCEPT THE EAST 587.88 FEET OF THE SOUTH 120 FEET THEREOF) OF SECTION 28, TOWNSHIP 40 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 12-28-429-023-0000

*Prepared by:*  
**O'Connor Title Services, Inc.**  
162 West Hubbard Street  
Chicago, IL 60610

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## MEDICAL CERTIFICATE OF DEATH

NUMBER

REGISTERED NUMBER **143**

Type or Print in See Funeral Director's Handbook for Instructions

1. REGISTERED NUMBER	143	DECEASED NAME	Richard Cook	FIRST	MIDDLE	LAST	SEX	2. Male	DATE OF DEATH	MONTH	DAY	YEAR	
3. COUNTY OF DEATH	Cook	4. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER	Melrose Park	5a. HOSPITAL OR OTHER INSTITUTION NAME	5b. STREET AND NUMBER	5c. CITY, TOWN, TWP. OR ROAD DISTRICT NO.	5d. STATE	6. DATE OF BIRTH	MONTH	DAY	YEAR	7. MARRIED, WIDOWED, DIVORCED, SEPARATED, SINGLE	
8a. MARRIED, WIDOWED, DIVORCED, SEPARATED, SINGLE	Married	8b. NAME OF SURVIVING SPOUSE	Esther Samczuk	8c. MARRIED, WIDOWED, DIVORCED, SEPARATED, SINGLE	Married	8d. DATE OF MARRIAGE	MONTH	DAY	YEAR	9. DATE OF DEATH	MONTH	DAY	YEAR
10. USUAL OCCUPATION	Research & Development	11a. CITY, TOWN, TWP. OR ROAD DISTRICT NO.	Franklin Park	11b. STATE	Illinois	11c. COUNTY	Cook	12. EDUCATION (SEE INSTRUCTIONS)	12a. HIGH SCHOOL	12b. COLLEGE	12c. POSTGRADUATE	13. RACE	
13a. STATE	Illinois	13b. ZIP CODE	60131	14a. MOTHER'S NAME	Ann	14b. FATHER'S NAME	Stanish	15. FATHER'S NAME	Ignatius Banicki	15b. MOTHER'S NAME	Esther Banicki	16. RELIGION	
17a. IMMEDIATE CAUSE (Final disease or condition resulting in death)	Mrs. Esther Banicki's wife (Mrs. Ignatius Banicki) died of a heart attack on 3/11/2000 at 10:20 A.M. in Melrose Park, Illinois. She was 65 years old at the time of her death. She had been in good health until a few days before her death. She was a resident of Melrose Park, Illinois for many years.												
18. PART I. CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (a) DUE TO OR AS A CONSEQUENCE OF (b) DUE TO OR AS A CONSEQUENCE OF (c) PART II. Other conditions contributing to death but not resulting in the underlying cause.	None												
19. DATE OF OPERATION, IF ANY	None												
20a. NAME AND ADDRESS OF CERTIFIER	Barbara Jaramela, 60929												
21. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER	None												
22. SIGNATURE	[Signature]												
23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER	None												
24. BURIAL	Franklin Park, Illinois												
25a. FUNERAL HOME	Cuneo-Columbian F.H., 10300 W. Grand Ave., Franklin Park, Illinois 60131												
25b. LOCAL REGISTRAR SIGNATURE	[Signature]												
26a. DATE	March 14, 2000												

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named at Item 1, and that this record was established and filed in my office in accordance with the provisions of the Illinois Vital Records Act.

DATE March 14, 2000 SIGNED Barbara Jaramela REGISTRAR

AT MELROSE PARK, Illinois OFFICIAL TITLE

The original record of this death is permanently filed with the ILLINOIS DEPARTMENT OF PUBLIC HEALTH at Springfield. County clerks and local registrars are authorized to make certifications from copies of the original record. The Illinois statutes provide that the certification of a death record by the Department of Public Health, local registrar or county clerk shall be prima facie evidence in all courts and places of the facts therein stated.