

# UNOFFICIAL COPY



Doc#: 1312218026 Fee: \$44.00  
RHSP Fee:\$10.00 Affidavit Fee:  
Karen A. Yarbrough  
Cook County Recorder of Deeds  
Date: 05/02/2013 10:55 AM Pg: 1 of 4

## DECEASED JOINT TENANCY AFFIDAVIT

**JANINA NOWAK**, a widow and not since remarried, being first duly sworn, on oath deposes and states, that she resides at 3109 North Oriole Avenue, Chicago, Cook County, Illinois 60707.

That said **JANINA NOWAK** is the surviving spouse of and was acquainted with **WALTER NOWAK**, deceased, who, at the time of his death, was one of the owners of the land in the City of Chicago, Cook County, Illinois, described as follows:

### Legal Description:

The South 40 Feet of the North 80 Feet of Lot 5 in John W. Thompson and Company's Second Addition to Elmwood Park Gardens Subdivision of the West 1/2 of the North West 1/4 of the North East 1/4 of Section 25, Township 40 North, Range 12 East of the Third Principal Meridian, in Cook County, Illinois.

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**Property Address:** 3109 North Oriole Avenue,  
Chicago, Illinois 60707

**Permanent Index Number:** 12 - 25 - 200 - 019 - 0000

That the decedent, **WALTER NOWAK**, died on November 1, 2011, as evidenced by a certified copy of Medical Certificate of Death of the deceased attached hereto.

That the decedent **WALTER NOWAK** died leaving a Last Will and Testament dated January 26, 2000. That said Last Will and Testament of **WALTER NOWAK** dated January 26, 2000, was filed on April 24<sup>th</sup>, 2013 in the Unproven Will Box of the Circuit Court of Cook County, Illinois - Probate Division.

Said **JANINA NOWAK** further states that with respect to the decedent, **WALTER NOWAK**, no Letters of Office are now outstanding on the decedent's estate and no Petition for Letters is contemplated or pending in Illinois or in any other jurisdiction.

That the total value of the estate of the deceased, **WALTER NOWAK**, 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 \$500,000.00.

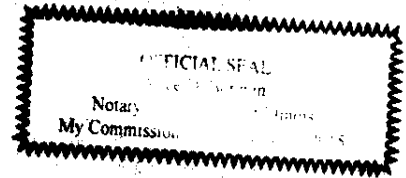
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Affiant makes this Affidavit for the purpose of recording this Deceased Joint Tenancy Affidavit with the Office of Cook County Recorder of Deeds.

JANINA NOWAK  
**JANINA NOWAK**

Subscribed and Sworn to before me by said **JANINA NOWAK**, a widow, this 30<sup>th</sup> day of April, Year 2013.

Alice Borzym  
Notary Public



This Document was prepared by and Mail To:

Law Offices of Alice D. Borzym  
6650 North Northwest Highway  
Suite 204  
Chicago, Illinois 60631

# CERTIFICATION OF DEATH RECORD

## UNOFFICIAL COPY

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

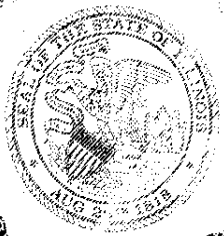
STATE FILE NUMBER 2011 0080819

DATE ISSUED 11/02/2011

DECEDENT'S LEGAL NAME WALTER NOWAK		SEX MALE	DATE OF DEATH NOVEMBER 01, 2011		
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 90 YEARS	DATE OF BIRTH FEBRUARY 06, 1921			
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME 3109 NORTH ORIOLE AVENUE			
PLACE OF DEATH DECEDENT'S HOME					
BIRTHPLACE POLAND	SOCIAL SECURITY NUMBER [REDACTED]-1450	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME JANINA WOJCIECHOWSKA	EVER IN U.S. ARMED FORCES? NO	
RESIDENCE 3109 NORTH ORIOLE AVENUE		APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60707	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION FRANCES NOWAK	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MARIA KOZLOWSKA	
INFORMANT'S NAME JANINA NOWAK		RELATIONSHIP WIFE	MAILING ADDRESS 3109 NORTH ORIOLE AVENUE, CHICAGO, IL, 60707		
METHOD OF DISPOSITION ENTOMBMENT	PLACE OF DISPOSITION SAINT ADALBERT CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE NILES, IL	DATE OF DISPOSITION NOVEMBER 03, 2011		
FUNERAL HOME BELMONT FUNERAL HOME, 7120 WEST BELMONT AVENUE, CHICAGO, IL, 60634					
FUNERAL DIRECTOR'S NAME SCOTT A JOHNSON			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015925		
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR NOVEMBER 1, 2011		
<b>CAUSE OF DEATH</b>	PART I. CONGESTIVE HEART FAILURE			APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
IMMEDIATE CAUSE <small>(Final disease or condition resulting in death)</small>	a.	Due to (or as a consequence of):			3 YEARS
	b.	CORONARY ARTERY DISEASE			4 YEARS
	c.	ATRIAL FIBRILLATION			1 YEARS
PART II. Enter other <b>significant conditions contributing to death</b> but not resulting in the underlying cause given in PART I. HYPERTENSION			WAS AN AUTOPSY PERFORMED? NO		
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A		
FEMALE PREGNANCY STATUS NOT APPLICABLE			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 SEPTEMBER 19, 2011	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 06:45 AM	
CERTIFIER PHYSICIAN			DATE CERTIFIED NOVEMBER 01, 2011		
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DOCTOR JAN WIACEK, 3204 NORTH OAK PARK AVENUE, CHICAGO, ILLINOIS, 60634				PHYSICIAN'S LICENSE NUMBER 036088918	

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

NOTE: FACILE SECURITY HOLOGRAPHIC FOLDS AT BOTTOM