# 0256-302501





Doc#: 1318826052 Fee: \$42.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A.Yarbrough

Cook County Recorder of Deeds

Date: 07/05/2013 02:33 PM Pg: 1 of 3

ATTORNEYS'
TITLE
GUARANTY
FUND,
INC.

### JOINT TENANCY AFFIDAVIT

STATE OF	ILLINOIS	. )
		) SS
COUNTY OF	COOK	)

Donato Albanese, hereby referred to as the affiant, states under oath that the affiant resides at 7655 W. 43rd Street, Lyons, IL; that the affiant was acquainted with Anticretta Albanese; at the time of the decedent's death, the decedent was one of the owners of a parcel of property by virtue of a property recorded joint tenancy or tenancy by the entirety deed, said property located in COOK County, Illinois, and legally described as follows:

Lot 11 in Meyer's River Highlands Sub livision of the North 1/2 of the North 1/2 of the Southwest 1/4 of Section 1, Township 38 North, Range 12, East of the Third Principal Meridian, in Cook County, Illinois.

Permanent Index Number(s): 18-01-306-006

Property Address: 7655 W. 43rd Street, Lyon, 1, 60534

The decedent died on Phichman 29, 20/2 leaving no last will and testament;

The decedent had no interest in any business or partnership, nor he'd any power of appointment at death, nor created any remainder interests in property by transfer with retention of a life interest therein or the creation of interests to take effect in possession or enjoyment after death;

The total value of decedent's estate, including the taxable interest in the above property, is 210,000, and that the value of the above property individually is 420,000;

The State Estate/Inheritance Tax and the Federal Estate Tax, if any, that was due from the decedent's estate, has been paid in full;

The affiant makes this affidavit to induce Attorneys' Title Guaranty Fund, Inc. (ATG) to issue its policy of title insurance on the above described property.

The affiant hereby covenants and agrees, individually, and for the affiants, heirs, personal representatives or assignees, to forever fully indemnify, protect, defend and hold ATG harmless and to reimburse ATG for all loss, costs, damages, suite, attorney's fees and expenses of every kind and nature that ATG may suffer, expend or incur by reason of the issuance of said policy free and clear of the following objections:

- 1. Claims against the estate of Antionetta Albanese, deceased, the decedent;
- 2. State Estate/Inheritance Tax and Federal Estate Tax that may be charged against the estate of said decedent;
- 3. Legacies, if any, created by the will of said decedent;

4. Rights of contribution.

Jonet albanese

Attorneys' Title Guaranty Fund, Inc.

1 S. Wacker Dr., STE 2400

Chicago, IL 60606-4650

Attn:Search Department

ATG FORM 3007 # ATG (REV. 1/00)

Prepared by ATG REsource™ Page 1 of FOR USE IN: AL STATE:

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## JOINT TENANCY AFFIDAVIT

(continued)

Subscribed and sworn to before me this

30	day of _	Mal	,	20/3
•		(Month)		(Year)
	4	(Notary Public)		

OFFICIAL SEAL JOSEPH LAZARA NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:08/15/15

commission

ote: If the decedent is ne death certificate and evis.

This instrument prepared by: Joseph La Zara 7246 West Touthy Chicago, IL 60631 Note: If the decedent left a will, a certified copy thereof must be presented to ATG for inspection, along with a certified copy of

1318626052 Page: 3 of 3

# CERTIFICATION OF DEATH RECORD

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

DECEDENT'S LEGAL NAME	ANERE					SEX FEMALE	DATE OF DEATH
ANTONIETTA M ALBA COUNTY OF DEATH	AMESE	I 1	LAST BIRTHDAY		DATE OF B	<b>ER</b> TH	DECEMBER 29, 2012
COOK		70 Y	'EARS		MAY 2	9, 1942	
CHICAGO				OSPITAL OR OTHER	177	track the second of the	ENTER
LACE OF DEATH				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
INPATIENT	 					<u> </u>	
HRTHPLACE ITALY	SOCIAL SI	ECURITY NUMBER	STATUS AT TIME O	F DEATH S	SURVIVING SPOUS DONATO A	The second second	THER'S MAIDEN NAME EVER IN U.S. ARMED FORCES? NO
TESIDENCE 5418 S NEENAH	70		APT NO.		OR TOWN		INSIDE CITY LIMITS? YES
COOK	STATE OP C		O PARENT'S NAME PRIOR O LA VALLE	TO FIRST MARRIAGE	AGE/CIVIL UNION MOTHER/CO-PARENT'S NAME PRIOR MARIA CARMELA SAR		NTS NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MELA SARLI
NFORMANT'S NAME DONATO ALBANESE			LATIONSHIP HUSBAND		MAILING ADDRE 5418 S NEI	The second second	GO, IL, 60638
METHOD OF DISPOSITION BURIAL		PLACE OF JISP RESUMHEC	OSITION TION CATHOLIC CE		LOCATION - CIT JUSTICE, IL	Y OR TOWN AND	STATE DATE OF DISPOSITION  JANUARY 04, 2013
UNERAL HOME RIDGE FUNERAL HO	ME, 6620 W.	ARCHER AVI	E., CHICAGO, IL.	60638			
UNERAL DIRECTOR'S NAME CRAIG J OPERZEDER			CTOR'S ILLINOIS LICENSE NUMBER 3				
CAL REGISTRAR'S NAME  DAVID ORR  DAVID ORR				TH LOCAL REGISTRAR 7, 2013			
CAUSE OF DEATH PA	RTI CARDIA	C ARREST / INF	LUENZA				
IMMEDIATE CAUSE	a.						
(Final disease or condition resulting in death)				consequence ():			
	b. HIGHT	VENTRICULAR (	-AILUME				
	c HERED	ITARY PULMON	Due to (or as a	i consequence di): DN		<del></del>	
4. 1 <sup>3</sup> - 1							
<del> </del>				t consequence of):	\		
PART II. Enter other significant	conditions cont	tributing to death	but not resulting in the t	inderlying cause giv	en in PART !	WA	S AN AUTOPSY PERFORMED? NO
•							RE AUTOPSY FINDINGS USED TO WPLETE CAUSE OF DEATH? N/A
EMALE PREGNANCY STATUS	\$					<del> </del>	VNLR DE DEATH
NOT PREGNANT WIT		EAR		i veri jir kalendari. Protestari	Ag Start		ATURA!
DATE OF INJURY		TIME OF I	WURY PL	ACE OF INJURY			INJURY AT WORK?
OCATION OF INJURY							
DESCRIBE HOW INJURY OCCU	UARED:	1, 1					IF TRANSPORTATION INJURY, SPECIF
					·	<del> </del>	
TTEND THE DECEASED?	DATELAST	SEEM ALIVE	MAKAR MEDICAL PMA	MINEDAL		בייוויייביי	THAT OF DEATH
ATTEND THE DECEASED? YES SERTIFIER	[·	SEEN ALIVE IBER 29, 2012	WAS MEDICAL EXA CORONER CONTAC		DATE PI	RONOUNCED	TIME OF DEATH 03:37 PM DATE CERTIFIED

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

Cook County Clerk