

UNOFFICIAL COPY

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS)
COUNTY OF COOK) SS.

Theresa Leonard being duly sworn states that she resides at 5907 West 89th Street in the Village of Oak Lawn, Illinois 60453.



Doc#: 1330216007 Fee: \$40.00
RHSP Fee: \$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 10/29/2013 10:07 AM Pg: 1 of 2

That she was acquainted with Kenneth L. Leonard deceased who, at the time of death, was one of the owners of the land in Cook County, Illinois, described as:

LEGAL DESCRIPTION.

LOT 1 IN MOLLY'S HIGHLANDS RESUBDIVISION OF LOTS 41, 42 AND 43 IN FRANK DELUGACH'S FLORENCE HIGHLANDS, BEING A SUBDIVISION OF THE NORTH 1/2 OF THE SOUTH 1/2 OF THE NORTHEAST 1/4 (EXCEPT THAT PART LYING EAST OF THE WEST LINE OF THE EAST 22 ACRES OF SAID SOUTH 1/2 OF THE NORTHEAST 1/4) OF SECTION 5, TOWNSHIP 37 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 24-05-216-047-0000

That the deceased died May 31, 2013, as evidenced by a certified copy of the death certificate of the deceased attached hereto.

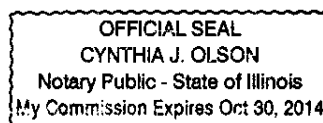
- That the deceased died: Leaving no Last Will & Testament.
- Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven will should be filed with the Clerk of the Probate Division of the Circuit Court of _____ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of _____ County, Illinois about _____.

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 One Hundred Thousand (\$100,000.00) dollars.

Theresa L. Leonard
Affiant's Signature

Subscribed and sworn to before me by the said Affiant this 25th day of October, A.D. 2013.

Cynthia J. Olson
Notary Public



UNOFFICIAL COPY

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

STATE FILE NUMBER 2013 0042835

DATE ISSUED 6/3/2013

DECEDENT'S LEGAL NAME KENNETH LAWRENCE LEONARD				SEX MALE	DATE OF DEATH MAY 31, 2013
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 63 YEARS		DATE OF BIRTH JULY 16, 1949		
CITY OR TOWN OAK LAWN		HOSPITAL OR OTHER INSTITUTION NAME ADVOCATE CHRIST MEDICAL CENTER			
PLACE OF DEATH INPATIENT					
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED] 4889	STATUS AT TIME OF DEATH MARRIED		SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME THERESA VILEIKIS	EVER IN U.S. ARMED FORCES? YES
RESIDENCE 5907 W 89TH STREET		APT. NO.	CITY OR TOWN OAK LAWN		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60453	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ROBERT LEONARD		MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION DOROTHY NEALY
INFORMANT'S NAME THERESA LEONARD		RELATIONSHIP WIFE		MAILING ADDRESS 5907 W 89TH STREET, OAK LAWN, IL, 60453	
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION ABRAHAM LINCOLN NATIONAL CEMETERY		LOCATION - CITY OR TOWN AND STATE ELWOOD, IL	DATE OF DISPOSITION JUNE 05, 2013
FUNERAL HOME THOMPSON AND KUENSTER FUNERAL HOME, 5570 W. 95TH STREET, OAK LAWN, IL, 60453					
FUNERAL DIRECTOR'S NAME ROBERT BERNARD KUENSTER				FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011257	
LOCAL REGISTRAR'S NAME DAVID ORR				DATE FILED WITH LOCAL REGISTRAR JUNE 3, 2013	
CAUSE OF DEATH PART I. SEPSIS					
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
		b. PNEUMONIA		Due to (or as a consequence of):	
		c. RESPIRATORY FAILURE		Due to (or as a consequence of):	
PART II. Enter other <i>significant conditions contributing to death</i> but not resulting in the underlying cause given in PART I.					
				WAS AN AUTOPSY PERFORMED? NO	
FEMALE PREGNANCY STATUS NOT APPLICABLE				WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
DATE OF INJURY				MANNER OF DEATH NATURAL	
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 MAY 31, 2013	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 08:57 PM	
CERTIFIER PHYSICIAN				DATE CERTIFIED JUNE 02, 2013	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH WAQAR MIAN, 2555 S KING DRIVE, CHICAGO, ILLINOIS, 60616				PHYSICIAN'S LICENSE NUMBER 036084085	

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: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM