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Doc#: 1409055048 Fee: \$46.25
RHSP Fee: \$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 03/31/2014 03:28 PM Pg: 1 of 4

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS) SS.
COUNTY OF COOK)

Pamela M. Zawila being duly sworn states that she resides at 8200 Central Avenue, Morton Grove, Illinois.

That she was acquainted with Bernice Zawila, deceased who, at the time of his death, was one of the owners of the land in Cook County, Illinois described as:

SEE ATTACHED LEGAL DESCRIPTION

That the deceased died on June 13, 2010 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 _____ County, Illinois.

Leaving a Last Will and Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of _____ County, Illinois about _____.

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Subscribed and sworn to before me
this 15th day of July, 2014.

[Signature]
Notary Public

Pamela M. Zawila
Affiant's signature



Property of Cook County Clerk's Office

Prepared by
Scott J. Reinhardt
Attorney at Law
2800 S. River Rd
Suite 390
Ors Plaines IL 60018

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LEGAL DESCRIPTION

For the premises commonly known as 8200 Central Avenue, Morton Grove, Illinois 60053

Lot 23 and 24 in Block 3 in Oliver Salinger and Company's Main Street Subdivision being a subdivision of Section 20 and the East Half of the Northeast Quarter of Section 19, Township 41 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois.

PIN # 10-20-410-043 & 10-20-410-044

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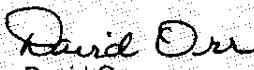
CERTIFICATION OF DEATH RECORD

CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2010 0043159				DATE ISSUED 06/15/2010			
DECEDENT'S LEGAL NAME BERNICE ZAWILA				SEX FEMALE		DATE OF DEATH JUNE 13, 2010	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 90 YEARS		DATE OF BIRTH DECEMBER 02, 1919			
CITY OR TOWN SKOKIE			HOSPITAL OR OTHER INSTITUTION NAME MIDWEST PALLIATIVE & HOSPICE CARECENTER				
PLACE OF DEATH HOSPICE FACILITY							
BIRTHPLACE JOLIET, IL		SOCIAL SECURITY NUMBER [REDACTED] 7813	MARITAL STATUS AT TIME OF DEATH WIDOWED		SURVIVING SPOUSE'S NAME		EVER IN U.S. ARMED FORCES? NO
RESIDENCE 8200 CENTRAL			APT. NO.	CITY OR TOWN MORTON GROVE		INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60053	FATHER'S NAME ANDREW POLAK		MOTHER'S NAME PRIOR TO FIRST MARRIAGE MARY LESNIAK		
INFORMANT'S NAME PAMELA ZAWILA			RELATIONSHIP DAUGHTER		MAILING ADDRESS 8200 CENTRAL, MORTON GROVE, IL, 60053		
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION MARYHILL CATHOLIC CEMETERY		LOCATION - CITY OR TOWN AND STATE NILES, IL		DATE OF DISPOSITION JUNE 16, 2010	
FUNERAL HOME COLONIAL-WOJCIECHOWSKI FH, 8250 N. MILWAUKEE AVENUE, CHICAGO, IL, 60646							
FUNERAL DIRECTOR'S NAME KAREN C BRULI				FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015746			
LOCAL REGISTRAR'S NAME CATHERINE COUNARD				DATE FILED WITH LOCAL REGISTRAR JUNE 15, 2010			
CAUSE OF DEATH PART I. PANCREATIC CARCINOMA							
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.	Due to (or as a consequence of):				
		b.	Due to (or as a consequence of):				
		c.	Due to (or as a consequence of):				
			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	
						WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
DID TOBACCO USE CONTRIBUTE TO DEATH?		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 JUNE 10, 2010	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO		DATE PRONOUNCED		TIME OF DEATH 01:35 AM
CERTIFIER PHYSICIAN						DATE CERTIFIED JUNE 14, 2010	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH MORRIS MAUER, MD, 581 E GOLF ROAD, DES PLAINES, ILLINOIS, 60016						PHYSICIAN'S LICENSE NUMBER 036-070419	

 APPROXIMATE
INTERVAL BETWEEN
ONSET AND DEATH


This is to certify that this is a true and correct copy from the official death record filed with Illinois Department of Health.


 David Orr
 Cook County Clerk

