

# UNOFFICIAL COPY



Doc#: 1431716022 Fee: \$44.00  
RHSP Fee:\$9.00 RPRF Fee: \$1.00  
Karen A.Yarbrough  
Cook County Recorder of Deeds  
Date: 11/13/2014 11:49 AM Pg: 1 of 4

AFTER RECORDING PLEASE MAIL TO PREPARER:

PREPARED BY:

Law Office Of Esperanza Rivera-Valenzuela, LLC  
6418 W. OGDEN AVE.  
BERWYN, IL 60402

PROPERTY ADDRESS: 5654 SOUTH WESTERN CHICAGO, IL 60636  
PIN NO 19-13-211-036-0000

Property of Cook County Clerk's Office

# UNOFFICIAL COPY

## DECEASED JOINT TENANCY AFFIDAVIT

State of Illinois )  
                          ) SS  
County of            )

The undersigned, ANTONIA KOZEL, being first duly sworn and under penalty of perjury on oath states that he or she resides at 2707 W. SEIPP, County of COOK, State of ILLINOIS.

That he or she was acquainted with MICHAEL KOZEL (A/K/A MICHAEL JOSEPH KOZEL), deceased, who, at the time of his or her death, was one of the owners of the land.

SEE ATTACHED LEGAL DESCRIPTION AND PROPERTY ADDRESS.

That the deceased died on JANUARY 2, 2013, as evidenced by a certified copy of the 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 is to 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 on \_\_\_\_\_.
- Leaving a Last Will and Testament which was probated in the Probate Division of the Circuit Court of \_\_\_\_\_ County, Illinois, on \_\_\_\_\_ as Case # \_\_\_\_\_.

That from the Estate of the Deceased:

- All State Inheritance and/or Federal Estate Taxes which were due have been paid and evidence thereof is attached hereto.
- No State Inheritance and/or Federal Estate Taxes were due.

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 \$300,000 dollars.

Affiant makes this affidavit for the purpose of inducing United World Title Services to issue a Title Insurance Policy(s), describing the above mentioned property and/or referenced in the above mentioned Title Commitment/Policy and agrees to indemnify said company or its assigns against any false statement(s) willfully made herein.

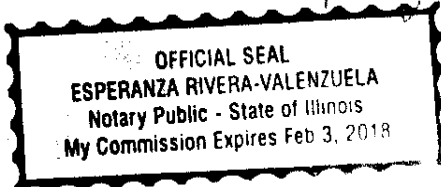
Date: 11-11-14

Antonia Kozel  
Affiant's Signature

Subscribed and Sworn before me this 11<sup>th</sup> day of November 2014.

My Commission Expires: 2/3/18

Esperanza Rivera  
Notary Public



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## LEGAL DESCRIPTION

LOT 5 IN BLOCK 1 IN COBE AND MCKINNON'S GAGE PARK, A SUBDIVISION OF THE SOUTH  $\frac{1}{2}$  OF THE SOUTH  $\frac{1}{2}$  OF THE NORTHEAST  $\frac{1}{4}$  OF THE NORTHEAST  $\frac{1}{4}$  OF SECTION 13, TOWNSHIP 38 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PROPERTY ADDRESS: 5654 SOUTH WESTERN CHICAGO, IL 60636  
PIN NO 19-13-211-036-0000

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# CERTIFICATION OF DEATH RECORD

## UNOFFICIAL COPY

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

### MEDICAL EXAMINER/CORONER CERTIFICATE OF DEATH

STATE FILE NUMBER 2013.0000508

MEDICAL EXAMINER'S CASE NUMBER 033 JAN 13

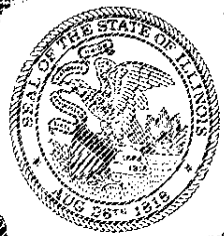
DATE ISSUED 1/7/2013

DECEDENT'S LEGAL NAME MICHAEL JOSEPH KOZEL			SEX MALE	DATE OF DEATH JANUARY 02, 2013
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 57 YEARS	DATE OF BIRTH SEPTEMBER 24, 1955		
CITY OR TOWN CHICAGO	HOSPITAL OR OTHER INSTITUTION NAME JOHN H. STROGER JR. HOSPITAL OF COOK CO			
PLACE OF DEATH EMERGENCY ROOM / OUTPATIENT				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER 343-52-0648	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME ANTONIA LUGO	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 2707 W SEIPP	APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60652	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION RUDOLPH KOZEL	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MARY BOZIC
INFORMANT'S NAME ANTONIA KOZEL	RELATIONSHIP WIFE	MAILING ADDRESS 2707 W SEIPP, CHICAGO, IL, 60652		
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION HOLY SEPULCHRE CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE ALSIP, IL	DATE OF DISPOSITION JANUARY 09, 2013	
FUNERAL HOME THOMPSON AND KUENSTER FUNERAL HOME, 5570 W. 95TH STREET, OAK LAWN, IL, 60453	FUNERAL DIRECTOR'S NAME ROBERT BERNARD KUENSTER			
LOCAL REGISTRAR'S NAME DAVID ORR	FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011257		DATE FILED WITH LOCAL REGISTRAR JANUARY 7, 2013	
CAUSE OF DEATH IMMEDIATE CAUSE <small>(Final disease or condition resulting in death)</small>	PART I: GUNSHOT WOUND OF BACK	APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH		
	a.			
	b.	Due to (or as a consequence of):		
	c.	Due to (or as a consequence of):		
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I				
FEMALE PREGNANCY STATUS NOT APPLICABLE			WAS AN AUTOPSY PERFORMED? YES	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? YES	
			MANNER OF DEATH HOMICIDE	
DATE OF INJURY JANUARY 2, 2013	TIME OF INJURY 5:21 PM	PLACE OF INJURY MECHANIC GARAGE		INJURY AT WORK? YES
LOCATION OF INJURY 5654 S. WESTERN, CHICAGO, IL, UNKNOWN				
DESCRIBE HOW INJURY OCCURRED: SUBJECT WAS SHOT				IF TRANSPORTATION INJURY, SPECIFY
ATTEND THE DECEASED?	DATE LAST SEEN ALIVE	WAS MEDICAL EXAMINER OR CORONER CONTACTED?	DATE PRONOUNCED JANUARY 02, 2013	TIME OF DEATH 9:09 PM
CERTIFIER MEDICAL EXAMINER/CORONER			DATE CERTIFIED JANUARY 05, 2013	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH STEPHEN J CINA, M.D., 2121 W HARRISON ST, CHICAGO, IL, 60612				PHYSICIAN'S LICENSE NUMBER

NOTE: FACILE SECURITY HOLOGRAPHIC FOLDS AT BOTTOM

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