

# UNOFFICIAL COPY

## Deceased Joint Tenancy Affidavit



Doc# 1635055128 Fee \$42.00

CHSP FEE: \$9.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 12/15/2016 01:47 PM PG: 1 OF 3

Acquest Title Services, LLC  
2016090421  
Acquest Title Services, LLC

File No. 2016090421

State of Illinois )

County of )

HELEN K. GRECO (Affiant) being first duly sworn, states that SHE  
(he/she) resides at 7400 N. OVERHILL, CHICAGO, IL, in the City of CHICAGO.  
That SHE (he/she) was acquainted with PHILIP G. GRECO,  
Deceased, who at the time of his/her death, was one of the owners of the land in  
COOK County, Illinois, described as:

See Exhibit "A" attached hereto and made a part hereof

That the deceased died 11/23/2010, as evidenced by a 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

RETURN TO:  
Acquest Title Services, LLC  
2800 W. Higgins Rd. # 180  
Hoffman Estates, IL 60169

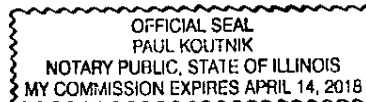
That the total value of the estate of the deceased, including both real and personal property  
owned by the deceased either individually or in joint tenancy at the time of death of the  
deceased, does not exceed the sum of \$ 1000.00. (enter the value of the estate.)

Affiant makes this affidavit for the purpose of inducing Acquest Title Services  
LLC/Fidelity National Title Insurance Company to issue its policy describing the above  
mentioned property.

X Helen K. Greco

Subscribed and sworn before me this 8 day of DEC, 2016

Notary Public



Mail to:  
HELEN K GRECO  
7400 N OVERHILL  
CHICAGO IL 60631

Prepared By:  
HELEN K GRECO  
7400 N OVERHILL  
CHICAGO IL 60631

# CERTIFICATION OF DEATH RECORD

## UNOFFICIAL COPY

### COOK COUNTY CLERK VITAL RECORDS

### CHICAGO, ILLINOIS

### MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2010 0085355

DATE ISSUED 11/29/2010

DECEDENT'S LEGAL NAME PHILIP G GREGO		SEX MALE	DATE OF DEATH NOVEMBER 23, 2010		
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 75 YEARS	DATE OF BIRTH SEPTEMBER 17, 1935			
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME NORTHWESTERN MEMORIAL HOSPITAL			
PLACE OF DEATH INPATIENT					
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER <del>XXXXXXXXXX</del>	MARITAL STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE'S NAME HELEN KRAWCZYK	EVER IN U.S. ARMED FORCES? YES	
RESIDENCE 7400 NORTH OVERHILL	APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES		
COUNTY COOK	STATE IL	ZIP CODE 60631	FATHER'S NAME SAMUEL GREGO	MOTHER'S NAME PRIOR TO FIRST MARRIAGE VICTORIA TORINA	
INFORMANT'S NAME JACKIE SMITH		RELATIONSHIP MEDICAL RECORDS	MAILING ADDRESS 251 EAST HURON, CHICAGO, IL 60611		
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION SAINT ADALBERT CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE NILES, IL	DATE OF DISPOSITION NOVEMBER 29, 2010		
FUNERAL HOME SKAJA TERRACE FUNERAL HOME, 7812 N MILWAUKEE AVENUE, NILES, IL 60714					
FUNERAL DIRECTOR'S NAME SAMANTHA MAY GEHRKING			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016368		
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR NOVEMBER 26, 2010		
CAUSE OF DEATH PART I					
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a. <u>HEART FAILURE</u>		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
Due to (or as a consequence of)		b. <u>MYOCARDIAL INFARCTION</u>			UNKNOWN
Due to (or as a consequence of)		c. <u>UNKNOWN</u>			UNKNOWN
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I			WAS AN AUTOPSY PERFORMED? NO		
DID TOBACCO USE CONTRIBUTE TO DEATH?			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 NOVEMBER 23, 2010	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 11:34 AM		
CERTIFIER PHYSICIAN			DATE CERTIFIED NOVEMBER 23, 2010		
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH MATTHEW PATTON, 251 EAST HURON, CHICAGO, ILLINOIS, 60611			PHYSICIAN'S LICENSE NUMBER 125-58607		

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

NON-REPRODUCIBLE SECURITY PHOTOGRAPHIC INFORMATION

# UNOFFICIAL COPY

## ACQUEST TITLE SERVICES, LLC

2800 West Higgins Road, Suite 180, Hoffman Estates, IL 60169

AS AGENT FOR

Fidelity National Title Insurance Company

Commitment Number: 2016090421

### SCHEDULE C PROPERTY DESCRIPTION

The land referred to in this Commitment is described as follows:

The South 15 feet of Lot 40 and the North 22 1/2 feet of Lot 41 of DeZengs Logan Square Subdivision of Block 3 in Garrett's Subdivision of part of the East Half of the Southeast Quarter of Section 26, Township 40 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois.

PIN: 13-26-427-004-0000

FOR INFORMATION PURPOSES ONLY:  
THE SUBJECT LAND IS COMMONLY KNOWN AS:  
2445 Kimball Avenue  
Chicago, IL 60647