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- 5) That said decedent left leaving no Last Will and Testament.

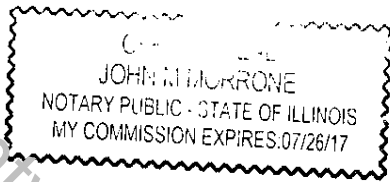
- 6) That the total value of said decedent's estate for State of Illinois Inheritance Tax/Estate and Federal Estate Tax purposes does not exceed \$1,000.00.

Anna Kowalczyk
 ANNA KOWALCZYK

SUBSCRIBED AND SWORN TO BEFORE
 me this 29 day of Nov, 2016.

[Signature]

 Notary Public



Property of Cook County Clerk's Office

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EXHIBIT "A"
TO THE DECEASED JOINT TENANCY AFFIDAVIT

LEGAL DESCRIPTION:

LOT 1 IN KASICK'S RESUBDIVISION OF LOT 28 (EXCEPT THE NORTH 393 FEET THEREOF) AND (EXCEPT THE SOUTH 134.91 FEET THEREOF) IN FREDERICK H. BARTLETT'S AERO FIELDS, BEING A SUBDIVISION OF THE SOUTH 20 ACRES OF THE EAST HALF OF THE NORTH EAST QUARTER OF SECTION 33, TOWNSHIP 38 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN AND THE SOUTH EAST QUARTER OF SAID SECTION 33 (EXCEPT THAT PART THEREOF DEDICATED FOR PUBLIC HIGHWAY BY DOCUMENT 7737153 RECORDED IN THE RECORDER'S OFFICE OF COOK COUNTY, ILLINOIS, DECEMBER 5, 1922 IN BOOK 175 OF PLATS, PAGE 20), IN COOK COUNTY, ILLINOIS.

COMMONLY KNOWN AS: 8645 SOUTH LAVERGNE AVENUE
BURBANK, IL 60459

PIN: 19-33-406-091-0000

Cook County Clerk's Office

CERTIFICATION OF DEATH RECORD**UNOFFICIAL COPY**

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2011 0096776

DATE ISSUED 12/30/2011

DECEDENT'S LEGAL NAME EMIL KOWALCZYK		SEX MALE	DATE OF DEATH DECEMBER 28, 2011	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 98 YEARS	DATE OF BIRTH DECEMBER 09, 1913		
CITY OR TOWN OAK LAWN		HOSPITAL OR OTHER INSTITUTION NAME ADVOCATE CHRIST MEDICAL CENTER		
PLACE OF DEATH INPATIENT				
BIRTHPLACE POLAND	SOCIAL SECURITY NUMBER [REDACTED] 2094	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME ANNA DEMKOWICZ	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 8645 SOUTH LAVERGNE AVE	APT. NO.	CITY OR TOWN BURBANK	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60459	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JOZEF KOWALCZYK	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JUSTYNA DEMKOWICZ
INFORMANT'S NAME ANNA KOWALCZYK		RELATIONSHIP WIFE	MAILING ADDRESS 8645 SOUTH LAVERGNE AVE, BURBANK, IL 60459	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION EVERGREEN CEMETERY	LOCATION - CITY OR TOWN AND STATE EVERGREEN PARK, IL	DATE OF DISPOSITION JANUARY 02, 2012	
FUNERAL HOME LAWN FUNERAL HOME LTD, 7909 STATE RD, BURBANK, IL, 60459				
FUNERAL DIRECTOR'S NAME DANIEL EDWARD JARKA			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 031009714	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR DECEMBER 29, 2011	
CAUSE OF DEATH - PART I PROSTATE CANCER				
IMMEDIATE CAUSE (Final cause or condition resulting in death)		Due to (or as a consequence of)		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
b.		Due to (or as a consequence of)		
c.		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	
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 TRANS-OF-CATION INJURY, SPECIFY	
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE DECEMBER 28, 2011	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 05:35 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED DECEMBER 29, 2011	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH WAQAR MIAN MD, 2555 SOUTH KING DRIVE, CHICAGO, ILLINOIS 60616			PHYSICIAN'S LICENSE NUMBER 036089086	

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: FACILE SECURITY HOLOGRAPHIC FOIL AT BOTTOM