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KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 01/09/2017 09:37 AM PG: 1 OF 4



ATTORNEYS' TITLE GUARANTY FUND, INC.

Illinois Offices:

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1/4

JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS

SS

COUNTY OF COOK

ANGELA PUIG hereby referred to as the affiant, states under oath that the affiant resides at 2460 CONFRANT TRAIL, in the City of WILMINGTON, State of IL; that the affiant was the decedent; at the time of death, the decedent was one of the owners of property, by virtue of a properly recorded joint tenancy deed said property located in Cook County, State of Illinois, and legally described as follows:

SEE ATTACHED LEGAL DESCRIPTION

IDA A. COHA

Attorneys' Title Guaranty Fund, Inc.
1 S. Wacker Dr., Ste. 2400
Chicago, IL 60606-4650
Attn: Search Department

The decedent had no interest in any business or partnership, nor held any power of appointment at death, nor created any remainder interests in property by transfer with retention of a life interest therein or the creation of interests to take effect in possession or enjoyment after death;

The decedent died on February 23, 2010, leaving no last will and testament;

The total value of decedent's estate, including the taxable interest in the above property was \$ 0.00, and the value of the above property individually was \$ 0.00;

The State and Estate/Inheritance Tax and the Federal Estate Tax, if any, that was due from the decedent's estate, has been paid in full;

The affiant makes this affidavit to induce Attorneys' Title Guaranty Fund, Inc., (ATG[®]) to issue its policy of title insurance on the above described property.

S X
P 14
S N
SC X
INT MB

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ATTORNEYS' TITLE GUARANTY FUND, INC.

LEGAL DESCRIPTION

Permanent Index Number:

Property ID: 12-24-212-045-0000

Property Address:

3804 N. OKETO AVE.
CHICAGO, IL 60634

Legal Description:

LOT 1 IN VOLK BROTHERS FOURTH ADDITION TO SHAW ESTATES, BEING A SUBDIVISION IN THE NORTH EAST FRACTIONAL 1/4 OF SECTION 24, TOWNSHIP 40 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN LYING SOUTH OF THE INDIAN BOUNDARY LINE ACCORDING TO THE PLAT THEREOF RECORDED SEPTEMBER 20, 1927 AS DOCUMENT 9795455, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office

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CERTIFICATE OF DEATH RECORD

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2010 0015138

DATE ISSUED 03/02/2010

DECEDENT'S LEGAL NAME IDA A COHA		SEX FEMALE	DATE OF DEATH FEBRUARY 23, 2010	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 76 YEARS	DATE OF BIRTH FEBRUARY 01, 1934		
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME RESURRECTION MEDICAL CENTER		
PLACE OF DEATH INPATIENT				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER	MARITAL STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE'S NAME MATTHEW COHA	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 3804 N OKETO	APT. NO.	CITY OR TOWN CHICAGO		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60634	FATHER'S NAME MICHAEL MELONE	MOTHER'S NAME PRIOR TO FIRST MARRIAGE ANGELICA DEL CORPO
INFORMANT'S NAME MATTHEW COHA		RELATIONSHIP HUSBAND	MAILING ADDRESS 3804 N OKETO, CHICAGO, IL 60634	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION SAINT JOSEPH CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE RIVER GROVE, IL	DATE OF DISPOSITION FEBRUARY 27, 2010	
FUNERAL HOME CUMBERLAND CHAPELS, 8300 W LAWRENCE AVE, NORRIDGE, IL, 60706				
FUNERAL DIRECTOR'S NAME LAWRENCE FRIEL			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011420	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR MARCH 1, 2010	
CAUSE OF DEATH PART I. CHRONIC HEPATITIS C				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a. CHRONIC HEPATITIS C		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH UNKNOWN YEARS
		b. LIVER CIRRHOSIS		UNKNOWN YEARS
		c. RESPIRATORY FAILURE		UNKNOWN DAYS
<small>Due to (or as a consequence of):</small>				
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	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
DID TOBACCO USE CONTRIBUTE TO DEATH? UNKNOWN	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 FEBRUARY 23, 2010	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 12:47 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED FEBRUARY 26, 2010	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH FRANK CAPOBIANCO, 7046 WEST HIGGINS, CHICAGO, ILLINOIS, 60656			PHYSICIAN'S LICENSE NUMBER 036069932	



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
David Orr
Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE