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SPECIAL NOTICE:

This form is <u>NOT</u> required by law, nor the Cook County Recorder of Deeds (CCRD). CCRD employees <u>CANNOT</u> assist with the preparation of this, or <u>ANY LEGAL FORM</u>.



Kathryn Ciesla, ESO. CIESLA BEELER, LLC 191 Waukigan Rd. Str. 315 Noethfald, 1L 60093



Doc# 1707234047 Fee \$42.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00

KAREN A.YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 03/13/2017 11:18 AM PG: 1 OF 3

DECEASED JOINT TENANCY AFFIDAVIT

Chanel Gerage the succiving	tenant of the joint tenancy created by the deed with the document
	reb) declare under oath that the joint tenant <u>James D. Gerage</u>
died on $9-24-2016$ as evidenced by	the attached certified copy of her/his death certificate (see attached).
I also declare that the aforementioned join	nt tenant was an owner of property with the following details:
	LEGAL DESCRIPTION
SEE ATTACH	ED
PROPER	RTY IDENTIFICATION NUMBER (PIN):
0 6 - 1 6 - 1	0 5 - 0 1 0 -
C	OMMONLY KNOWN ADDRESS:
215 Forest Vi	ew Dr.
Elgin, IL	60120
Finally, I declare that the status of th	ne deceased joint tenant at the time of her/his death was the following:
Leaving NO LAST	Leaving an UNFILED WILL Leaving a FILED WILL
WILL & TESTAMENT	& TESTAMENT (ATTACH)
NOTARY & A	AFFIANT SIGNATURE SECTION BELOW
Substribed & Sworn to me by:	
MAR	
Affiant Signature:	OFFICIAL SEAL
The I leaved	APTIM NOTAGE EVANS THE SECTION NOTARY PUBLIC - STATE OF ILLINOIS NY COMMISSION EXPIRES 19/15/18
On the Following Date:	MY COMMISSION EXT INCOME.
2-17-2017	



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LOT 55 IN ROLLING KNOLLS ESTATES, UNIT NUMBER 3, A SUBDIVISION OF PART OF LOT 7 IN COOK COUNTY, CLERK'S DIVISION OF SECTION 16, TOWNSHIP 41 NORTH, RANGE 9, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinios.
hereby releasing and waiving all lights under take of
Paul Egipte Index Number(s) 00 10 10 10 012
Address(es) of Real Estate: 215 FOREST VIEW DRIVE, ELGIN, IL 60120
Address(es) of Real Estate: 217 FOREST VIEW

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL EXAMINER/CORONER CERTIFICATE OF DEATH

STATE FILE NUMBER 2016 0075525 MEDICAL EXAMINER'S CASE NUMBER ME2016-04809 DATE ISSUED 2/1	6/2017
DECEDENT'S LEGAL NAME JAMES D'GERAGE SEX DATE OF DEATH SEPTEMBER 24, 2016	
COUNTY OF DEATH AGE AT LAST BIRTHDAY COOK AGE AT LAST BIRTHDAY MAY 25, 1973	
CITY OR: TOWN HOSPITAL OR OTHER INSTITUTION NAME 620 W 21ST	
PLACE OF DEATH SCENE	450
BIRTHPLACE SOCIAL SECURITY NUMBER STATUS AT TIME OF DEATH SURVIVING SPOUSEICIVIL UNION PARTNER'S MAIDEN NAME EVER IN U.S. ARM CHICAGO, IL 339-82-0329 MARRIED CHANEL ABURY FORCES? NO	
RESIDENCE APT NO. CITY OR TOWN INSIDE CITY UMITS? 109 REMMINGTON DF BARRINGTON HILLS YES	
COUNTY STATE ZIP CODE FATHER/CO-PARENTS NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MOTHER/CO-PARENTS NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION CHRISTINA ALBERTS COOK IL 60010 CHARLES GERAGE CHRISTINA ALBERTS	ION
INFORMANT'S NAME. CHANEL GERAGE RELATIONSHIP MAILING ADDRESS 109 REMMINGTON DR: BARRINGTON HILLS, IL, 60010	
METHOD OF DISPOSITION PI CE OF DISPOSITION LOCATION CITY OR TOWN AND STATE DATE OF DISPOSITION PALATINE IL SEPTEMBER:30, 2016	<u> </u>
FUNERAL HOME MANISCALCO, 2114 W IRVING PARKIRD, CLICAGO, IL, 60618	
FUNERAL DIRECTOR'S NAME FRANK MANISCALCO 03401.1495	
LOCAL REGISTRAR'S NAME DAVID ORR OCTOBER 20, 2016	
CAUSE OF DEATH PART I. MULTIPLE INJURIES	
(Final disease or condition Due to (or as a c inseque, ce of): Positing in death) 6. ASSAULT	
Due to (or as a consequence o.	
PART II Enter other significant conditions contributing to death but not resulting in the underlying cause given in PAR. WAS AN AUTOPSY PERFORMED? YES	
WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? YES	
FEMALE PREGNANCY STATUS NOT APPLICABLE MANNER OF DEATH HDMICIDE	
DATE OF INJURY TIME OF INJURY PLACE OF INJURY INJURY AT WOR SEPTEMBER 23, 2016 07:46 PM AUTOMOBILE NO	K?
LOCATION OF INJURY 620 WEST, 21TH STREET, CHICAGO, IL, 60616	
DESCRIBE HOW INJURY OCCURRED: ASSAULTED BY OTHER(S)	CIFY
ATTEND THE DECEASED? DATE LAST SEEN ALIVE: WAS MEDICAL EXAMINER OR DATE PRONOUNCED TIME OF DEATH CORONER CONTACTED? SEPTEMBER 24, 2016 12,45 AM	
CERTIFIER DATE CERTIFIED OCTOBER 20, 2016	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH	R



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.





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- · This backer copy is constructed with a microtext border. Inspection under magnifier shows "ILLINOISDEATHCERTIFICATE" in microtext.
- Document is protected with embossed Cook County seals.
- · Inspect background with a magnifier to verify the encrypted NaNQcopy™ algorithm in body of document.
- · Photocopying this document produces the word "VOID" across the face.

U.S. Security Patents: 6,692,030, 7,196,822

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