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KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 06/23/2017 09:46 AM PG: 1 OF 3

Property of Cook County Clerk's Office

COOK COUNTY RECORDER

COVER PAGE FOR

DECEASED JOINT TENANCY AFFIDAVIT

ON PROPERTY LOCATED AT

1735 WEST CULLERTON STREET
CHICAGO, IL 60608

17BAR41165
PLEASE RETURN TO:
BARRISTER TITLE
15000 SO. CICERO AVE.
OAK FOREST, IL 60452

PIN:

17-19-420-011-0000

DATE:

June 14, 2017

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DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS)
) SS.
COUNTY OF COOK)

GINA ABRAHAM, hereinafter called Affiant, being duly sworn, states that she resides at 1735 W. Cullerton Street, Chicago IL 60608. That Affiant was acquainted with ELPIDIO PINTOR, hereinafter referred to as Deceased, and at the time of Decedent's death, was one of the owners of the land in Cook County, Illinois, described as:

LOT 65 (EXCEPT THE SOUTH 31 FEET CONDEMNED BY THE METROPOLITAN WEST SIDE ELEVATED RAILROAD COMPANY) IN LOMBARD'S SUBDIVISION OF BLOCK 50 IN SECTION 19 TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Common Address: 1735 W. Cullerton Street, Chicago, IL 60608

PIN # 17-19-420-011-0000

That the Deceased died on December 9, 2014, as evidenced by a copy of Deceased's death certificate attached hereto.

That the Deceased, at the time of his death, held his share of the above-mentioned property as a joint tenant and that the Deceased died leaving no will & testament.

The total value of the estate of the Deceased, for estate tax purposes, 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 \$225,000.00.

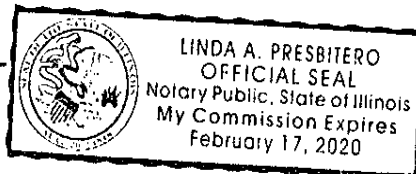
Affiant makes this affidavit for the purpose of any individual or corporation who may be harmed by the Affiant's lack of veracity.

Gina Abraham

Gina Abraham-Affiant

Subscribed and sworn to before me this 14th day of June, 2017.

[Signature]
Notary Public



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CERTIFICATION OF DEATH RECORD

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL EXAMINER/CORONER CERTIFICATE OF DEATH

STATE FILE NUMBER 2014 0095494 MEDICAL EXAMINER'S CASE NUMBER ME2014-01818 DATE ISSUED 3/31/2015

DECEDENT'S LEGAL NAME ELPIDIO PINTOR		SEX MALE	DATE OF DEATH DECEMBER 09, 2014	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 47 YEARS	DATE OF BIRTH NOVEMBER 28, 1967		
CITY OR TOWN CHICAGO	HOSPITAL OR OTHER INSTITUTION NAME 1735 W CULLERTON			
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE MEXICO	SOCIAL SECURITY NUMBER [REDACTED]	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME GINA ABRAHAM	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 1735 W CULLERTON AVE	APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60608	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION LORENZO PINTOR	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION FRANCISCA ORTIZ
INFORMANT'S NAME PEGGY SCHWARTZ		RELATIONSHIP MEDICAL RECORDS	MAILING ADDRESS 2121 W HARRISON, CHICAGO, IL, 60612	
METHOD OF DISPOSITION CREMATION	PLACE OF DISPOSITION HEIGHTS CREMATORY	LOCATION - CITY OR TOWN AND STATE CHICAGO HEIGHTS, IL	DATE OF DISPOSITION DECEMBER 16, 2014	
FUNERAL HOME CORDERO FUNERAL HOME, 1822 S. ASHLAND AVE, CHICAGO, IL, 60608				
FUNERAL DIRECTOR'S NAME JUSTIN ALVARADO CORDERO			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034012000	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR MARCH 9, 2015	
CAUSE OF DEATH		PART I	PULMONARY THROMBOEMBOLISM	APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a	Due to (or as a consequence of)	
		b	DEEP VEIN THROMBOSIS	
			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. HYPERTENSIVE CARDIOVASCULAR DISEASE, DIABETES MELLITUS			WAS AN AUTOPSY PERFORMED? YES	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? YES	
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?	DATE LAST SEEN ALIVE	WAS MEDICAL EXAMINER OR CORONER CONTACTED?	DATE PRONOUNCED DECEMBER 09, 2014	TIME OF DEATH 02:25 PM
CERTIFIER MEDICAL EXAMINER/CORONER			DATE CERTIFIED MARCH 09, 2015	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH STEPHEN J. CINA MD, 2121 W HARRISON ST, CHICAGO, IL, 60612			PHYSICIAN'S LICENSE NUMBER	

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: EMBOSSED STATE AND COUNTY SEALS 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