UNOFFICIAL COPY

Doc# 1805955000 Fee \$42.00

CHICAGO TITLE INSURANCE COMPANY
DECEASED JOINT TENANCY AFFIDAVIT

RHSP FEE:\$9.00 RPRF FEE: \$1.00 KAREN A.YARBROUGH COOK COUNTY RECORDER OF DEEDS DATE: 02/28/2018 10:04 AM PG: 1 OF 3

State of fillinois	/ X.	•	
County of Cook) ss.	Order No.	
•	Ox		
Ljubica Milosev		being duly sworn state	es
that she resides at	805 Dresser Dr ve		in
the City of <u>Mount Pro</u>	spect		
That she was acquain Bogoljub Milosev	ted with		
Deceased who, at the time County, Illinois, described	of <u>his</u> death, was one of the as:	owners of the land in <u>Cook</u>	
EAST FRACTIONAL 1/4 AND E	ENT COMPANY'S WE-GO PARK UNI AST 1/2 OF THE NORTH WEST FRA AN, IN COOK COUNTY, ILLINOIS.	IT NUMBET, 2 BEING A SUBDIVISION OF THE WEST 1/2 OF THE NORT CTIONAL 1/4 OF SECTION 11, TOWNSHIP 41 NORTH, RANGE 11, EAST PIN - US - 11 - 220 - 034 - 0000	H T C
That the deceased died	January 1, 2011	, as evidence	ed
That the deceased died:	certificate of the deceased atta	cned nereto.	

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 the death of the deceased, does not exceed the sum of dollars.

Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven Will

Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the

_____ County, Illinois about __

should be filed with the Clerk of the Probate Division of the Circuit Court of

Affiant makes this affidavit for that purpose of inducing the Chicago Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to before me by the said

Leaving no Last Will & Testament.

Circuit Court of

County, Illinois.

1805955000 Page: 2 of 3

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Ljubi ca Milosev

this 20th day of February, A.D. 7018

Notary Public

d www. (affiant's signature)

OFFICIAL SEAL
EVA JOVIC
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES 04/19/20

PREPARED BY CERC, BERG & PANDEY 5215 DLO DRCHARD RD#220
SECRIE, IL 60077

CERTIFICATION OF DEATH RISCORD

COOK COUNTY CLERK VITAL RECORDS

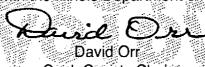
CHICAGO, ILLINOIS
MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2011 0000011

DATE ISSUED 01/04/2011

ानसम्बद्धाः सुन्तर स्	
DECEDENTS LEGAL NAME BOGOLJUB MILOS	V SEX DATE OF DEATH MALE JANUARY 01; 2011
COOK	AGE AT LAST BIRTHDAY DATE OF BIRTH COCTOBER 30, 1951
CITY OR TOWN MT PROSPECT	HOSPITAL OR OTHER INSTITUTION NAME 805 DRESSER DR
PLACE OF DEATH	
BIRTHPLACE YUGOSLAVIA	SOCIAL SECURITY NUMBER MARITAL STATUS AT TIME OF DEATH SURVIVING SPOUSE'S NAME EVER IN U.S. ARMED JUBICA DAMJANOVICH FORCES? NO
RESIDENCE 805 DRESSER DR	APT NO. CITY.OR.TOWN INSIDE CITY.LIMITS? MT. PROSPECT. YES
COOK	STAT ZIP CODE FATHER'S NAME BOGDAN MILOSEV MOTHER'S NAME PRIOR TO FIRST MARRIAGE STEVANIJA SLIJAPIC
INFORMANT'S NAME LJUBICA MILOSEN	RELATIONSHIP MAILING ADDRESS: 805 DRESSER DR, MT PROSPECT, IL, 60056
METHOD OF DISPOSITION	LOCATION - CITY OR TOWN AND STATE DATE OF DISPOSITION SAIN 67 /A SERBIAN ORTHODOX CHURCH & CEMETERY LIBERTYVILLE, IL JANUARY 04, 2011
FUNERAL HOME	IERAL HOME, 5776 W. LAW RENCE AVE, CHICAGO, IL, 60630
FUNERAL DIRECTOR'S NAME B MICHAEL MUZYM	FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER
LOCAL REGISTRAR'S NAMI DAVID ORR	DATE FILED WITH LOCAL REGISTRAR JANUARY 3, 2011
CAUSE OF DEATH	RT I METASTATIC RENAL CELL CANCER
(Final disease or condition resulting in death)	Due to (or as a con equence of):
	One fo (ot as a cotagineuse oil): A PPRA ON SET A SET
	Due to (or as a corresquence of):
DART III Estar other signifie	Due to (or as a consequence of): t conditions contributing to death but not resulting in the underlying cause given in PART). WAS AN AUTOPSY PERFORMED?: [INKNOW]
PART III CIRCI GUINI SIGNING	WERE AUTOPSY FINDINGS USED TO
DID TOBACCO USE CONTR	
DATE OF INJURY	NOT APPLICABLE VALUE INJURY PLACE OF INJURY INJURY INJURY INJURY INJURY INJURY INJURY AT WORK?
LOCATION OF INJURY	
DESCRIBE HOW INJURY O	URRED IF TRANSPORT ATION INJURY, SPECIFY
NO NO	DATE LAST SEEN ALIVE WAS MEDICAL EXAMINER OR DATE PRONOUNCED TIME OF DEATH UNKNOWN CORONER CONTACTED? NO 12:20 PM
CERTIFIER PHYSICIAN	DATE CERTIFIED JANUARY 03, 2011
	DE OF PERSON COMPLETING CAUSE OF DEATH EL, 405 LAKE ZURICH RD, BARRINGTON, ILLINOIS, 60010 PHYSICIAN'S LICENSE NUMBER 036075838

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.



Cook County Clerk

