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Doc# 1811755175 Fee \$42.00
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KAREN A. YARBROUGH
COOK COUNTY RECORDER OF DEEDS
DATE: 04/27/2018 03:07 PM PG: 1 OF 3

SPECIAL NOTICE:

This form is not required by law, nor is it a requirement of the Cook Cook County Recorder of Deeds Office. CCRD employees CANNOT assist with the completion of this LEGAL form, or provide advice regarding it.

SURVIVING TENANT AFFIDAVIT

INSTRUMENT PREPARED BY:

Law Offices of Beata Valente, LLC (NAME)

5508 W. Lawrence Ave (ADDRESS)

Chicago, Illinois (CITY/STATE)

6 0 6 3 0 - [] [] [] [] (ZIP CODE)

I KRZYSZTOF KALATA, the surviving tenant of the ~~joint~~ tenancy created by the deed with document number: 1710149084 do hereby declare under oath that the ~~joint~~ tenant, BOGULSAW K. KALATA died on 10 05 2017 as evidenced by the attached certified copy of his or her death certificate (see attached). I also declare that the aforementioned named ~~joint~~ tenant was an owner of the property with the legal description of:

See attached for Legal Description

the Property Identification Number (PIN) of:

1 3 - 2 9 - 3 1 7 - 0 2 2 - 0 0 0 0

& the Commonly Known Address of:

2554 N. Mcvicker Ave.,
Chicago, IL 60639

Furthermore, the document attached is:

Leaving NO LAST WILL & TESTAMENT	Leaving a LAST WILL & TESTAMENT, which is attached, and the ORIGINAL of the UNPROVEN WILL BE filed with the Clerk of the Probate Division of the Circuit Court of _____ County, In _____	Leaving a LAST WILL & TESTAMENT, which is attached, and the ORIGINAL of the PROVEN HAS BEEN filed with the Clerk of the Probate Division of the Circuit Court of _____ County, In _____
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Notary & Affiant Signature Section

Subscribed and sworn to me by:

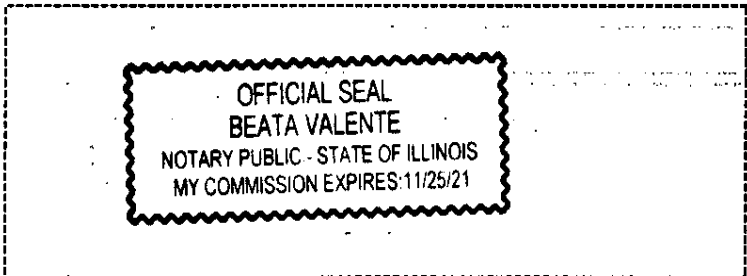
KRZYSZTOF KALATA (Printed Name of Affiant)

this: 18 day of April, 2018

[Signature]
NOTARY PUBLIC SIGNATURE

[Signature]
AFFIANT/SURVIVING TENANT SIGNATURE

AFFIX NOTARY STAMP BELOW



CERTIFICATION OF DEATH RECORD**UNOFFICIAL COPY**

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2017 0080794

DATE ISSUED 10/13/2017

DECEDENT'S LEGAL NAME BOGUSLAW KALATA		SEX MALE	DATE OF DEATH OCTOBER 05, 2017	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 55 YEARS	DATE OF BIRTH APRIL 01, 1962		
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME HORIZON HOSPICE AND PALLIATIVE CARE		
PLACE OF DEATH HOSPICE FACILITY				
BIRTHPLACE POLAND	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH DIVORCED FROM MARRIAGE	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 2554 N MCVICKER AVE		APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60639	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION KAZIMIERZ KALATA	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JANINA BIGALSKA
INFORMANT'S NAME KRZYSZTOF KALATA		RELATIONSHIP SON	MAILING ADDRESS 2554 N MCVICKER, CHICAGO, IL, 60639	
METHOD OF DISPOSITION CREMATION	PLACE OF DISPOSITION HEIGHTS CREMATORY	LOCATION - CITY OR TOWN AND STATE CHICAGO HEIGHTS, IL	DATE OF DISPOSITION OCTOBER 11, 2017	
FUNERAL HOME PIETRYKA FUNERAL HOME, 5734 W DIVERSEY AVE, CHICAGO, IL, 60639				
FUNERAL DIRECTOR'S NAME NINA Y ROSARIO			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016939	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR OCTOBER 11, 2017	
CAUSE OF DEATH	PART I	METASTATIC LUNG CANCER		
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a	Due to (or as a consequence of)		
	b	Due to (or as a consequence of)		
	c	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.				APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
FEMALE PREGNANCY STATUS NOT APPLICABLE				WAS AN AUTOPSY PERFORMED? NO
DATE OF INJURY				WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A
TIME OF INJURY	PLACE OF INJURY	MANNER OF DEATH NATURAL		
LOCATION OF INJURY				INJURY AT WORK?
DESCRIBE HOW INJURY OCCURRED				IF TRANSPORTATION INJURY, SPECIFY
ATTEND THE DECEASED? NO	DATE LAST SEEN ALIVE UNKNOWN	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 7:00 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED OCTOBER 10, 2017	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH OLAYNIKA AKINOLA, 710 SOUTH PAULINA ST, CHICAGO, ILLINOIS, 60612			PHYSICIAN'S LICENSE NUMBER 036131341	

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



D00146126

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

UNOFFICIAL COPY

Legal Description

Property Tax Identification Number: **13-29-317-022-0000**

Property Address: **2554 N. Mcvicker Ave., Chicago, IL 60639**

LOT 39 IN BLOCK 1 IN J.E. WHITES KELLOGG PARK, BEING A SUBDIVISION IN SECTION 29, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office