## **UNOFFICIAL COPY**

## DECEASED JOINT TENANCY AFFIDAVIT

CYNTHIA J. OLSON OFFICIAL SEAL Notary Public - State of Illinois My Commission Expires October 30, 2018

STATE OF ILLINOIS COUNTY OF COOK SS. Donna M. Hufnagl being duly sworn states Doc# 1815722026 Fee ≸40.00 that she resides at 3333 Hopkins Street in the RHSP FEE:\$9.00 RPRF FEE: \$1.00 Village of Steger, Illinois 60475. KAREN A. YARBROUGH COOK COUNTY RECORDER OF DEEDS That she was acquainted with Edward A. DATE: 06/06/2018 11:26 AM PG: 1 OF 2 Hufnagl, deceased who, at the time of death, was one of the owner; of the land in Cook County, Illinois, described as: LEGAL DESCRIPTION: LOTS 33 AND 34 INCLUSIVE IN BLOCK 28 IN KEENEY'S SUBDIVISION OF CHICAGO HEIGHTS, A SUBDIVISION OF THE EAST % OF THE SOUTHWEST 1/4 AND THE WEST ½ OF THE SOUTHEAST 1/4 OF SECTION 33, TOWNSHIP 35 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. PIN: 32-33-331-050-0000 That the deceased died July 8, 2017, as evidenced by a certified copy of the death certificate of the deceased attached hereto. X That the deceased died: Leaving no Last Will & Testament. Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven will should be filed with the Clerk of the Probate Division of the Circuit Court of Cook County, Illinois. Leaving a Last Will & Testament which was filed in the Ungroven Will Box of the Probate Division of the Circuit Court of Cook County, Illinois about 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 One Hundred Thousand (\$100,000.00) dollars. Affiant's Signature - Donna M. Hufnagl Prepared By and Return To: John Z. Toscas, Esq., 12616 S. Harlem Avenue, Palos Heights, IL 60463 Subscribed and sworn to before me by the said lot day of June Affiant this Notary Public

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COOK COUNTY CLERK VITAL RECORDS

## CHICAGO, ILLINOIS

		MEDI	CAL CERTI	FICATE O	F DEATI	1			
STATE FILE NUMBER 2017 0	054923		<b>製.變智</b>					ISSUED	7/10/2017
DECEDENT'S LEGAL NAME EDWARD A HUFNAGL						SEX MALE	DATE OF DEATH JULY 08, 201	7 📳	
COOK		AGE AT LAST BIF 82 YEARS			DATE OF B	іRTH MBER 05; 19:	34		
CITY OR TOWN STEGER			1. A.M. 1995 1993 1994	TAL OR OTHER I	NSTITUTION	NAME			
PLACE OF DEATH  DECEDENT'S HOME									18.00
BIRTHPLACE CHICAGO, IL	SOCIAL SECURIT	Y NUMBER STATU	JS AT TIME OF DEA	100	to detail V.	E/CIVIL UNION PAR	TNER'S MAIDEN NAME	EVER IN U.S. A	
RESIDENCE 3333 HOPKINS			APT. NO.	CITY OF	TOWN SER		IN	SIDE CITY LIMIT	35555
COUNTY STAT	ZIP CODE	GEORGE H	TS NAME PRIOR TO FI			MARIA EIC	NT'S NAME PRIOR TO FIR HBAUER	ST MARRIAGE/CIVI	IL UNION
INFORMANTS NAME		RELATIONS	SHIP.		LING ADDRE	ss INS, STEGE	R. IL. 60475		
METHOD OF DISPOSITION CREMATION		E OF DISPOSITION		LOC		OR TOWN AND	STATE DATE OF D		
FUNERAL HOME STEGER FUNERAL HOM	ME, 125 E STEG	ER RCAD, STI	EGER, IL, 6047	75					
FUNERAL DIRECTOR'S NAME JOHN J PARZYGNOT						FUNERAL DIRE 03401184	CTOR'S ILLINOIS LICE	NSE NUMBER	
LOCAL REGISTRAR'S NAME DAVID ORR						DATE FILED WI	TH LOCAL REGISTRAF		
CAUSE OF DEATH PART	L END STAGE R	ENAL DISEASE					<u> </u>	2 YE4	ARS
IMMEDIATE CAUSE (Final disease or condition resulting in death)	b. GANGRENE O	F PIGHT FOOT	Due to (or as a onse	equênce of):			XIMAT BETW VD DEA	• • · · ·	
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	SECONARY TO	) PERIPHERAL \	Due to (or as a conse /ASCULAR DISE				INI NO	100	NTUC
			Due to (or as a conse						NTHS
PART II. Enter other significant con	nditions contributing	to death but not re	sulting in the under	ying cause given	în PAR		S AN AUTOPSY PERF	9486	
FEMALE PREGNANCY STATUS						co	MPLETE CAUSE OF DE		993 1454 3 44
NOT APPLICABLE			The state of the state of				ATURAL		
DATE OF INJURY		TIME OF INJURY	PLACE (	OF INJURY				INJURY AT WO	ORK?
LOCATION OF INJURY									
DESCRIBE HOW INJURY OCCURR	EO						IF TRANSPIRT	TION INJURY SI	PECIFY
ATTEND THE DECEASED?	DATE LAST SEEN AL		MEDICAL EXAMINE		DATE PR	RONOUNCED		TIME OF DEATH	territ
CERTIFIER PHYSICIAN							DATE CERTIFIED JULY 10, 20		



D00012346

PHYSICIAN'S LICENSE NUMBER

JULY 10, 2017

036049311



NAME ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH LYLE MUNN, 600 SUPERIOR, MUNSTER, INDIANA, 46321

> 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



