

UNOFFICIAL COPY

DECEASED JOINT
TENANCY AFFIDAVIT



1908600025

State of Illinois)
) ss.
County of Cook)

Order No.

Doc# 1908600025 Fee \$42.00
RHSP FEE:\$9.00 RPRF FEE: \$1.00
EDWARD H. MOODY
COOK COUNTY RECORDER OF DEEDS
DATE: 03/27/2019 08:58 AM PG: 1 OF 3

JOSEPH MANNO (aka
JOSEPH A. MANNO) being
duly sworn states that he
resides at 5305 S. Mayfield
Avenue in the City of Chicago.

That he was married to PATRICIA MANNO, deceased, who, at the time of her death, was one of the owners of the land in Cook County, Illinois, described as:

LOT 38 (EXCEPT THE SOUTH 8 FEET) AND LOT 39 (EXCEPT THE NORTH 9 FEET)
BLOCK 22 IN CRANE ARCHER HOME ADDITION TO CHICAGO AS SUBDIVISION OF
PART OF THE SOUTH EAST 1/4 OF SECTION 8 TOWNSHIP 38 NORTH RANGE 13 EAST
OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS.

Permanent Real Estate Index Number: 19-08-418-051-0000
Address of Real Estate: 5305 S. Mayfield Avenue, Chicago, Illinois

That the deceased died July 20, 2018, as evidenced by a certified copy of death certificate of the deceased attached hereto.

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 _____ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of _____ County, Illinois about _____.

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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 \$250,000 dollars.

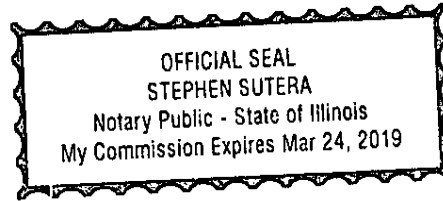


JOSEPH MANNO (aka JOSEPH A. MANNO)

Subscribed and sworn to before me by the said JOSEPH MANNO (aka JOSEPH A. MANNO) on March 20, 2019.



Notary Public



This instrument was prepared by and MAIL TO:
STEPHEN SUTERA, Attorney
4927 West 95th Street
Oak Lawn, Illinois 60453
(708)857-7255

CERTIFICATION OF DEATH RECORD

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COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2018 0059620

DATE ISSUED 7/25/2018

DECEDENT'S LEGAL NAME PATRICIA A MANNO		SEX FEMALE	DATE OF DEATH JULY 20, 2018	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 70 YEARS	DATE OF BIRTH MAY 20, 1948		
CITY OR TOWN BERWYN		HOSPITAL OR OTHER INSTITUTION NAME MAC NEAL MEMORIAL HOSPITAL		
PLACE OF DEATH INPATIENT				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER 328-44-2043	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME JOSEPH MANNO	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 5305 S MAYFIELD		APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60638	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ROCCO PAVESE	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION VIOLET DEGENOVA
INFORMANT'S NAME JOSEPH MANNO		RELATIONSHIP HUSBAND	MAILING ADDRESS 5305 S MAYFIELD CHICAGO, IL 60638	
METHOD OF DISPOSITION CREMATION	PLACE OF DISPOSITION MORCAN CREMATION SERVICES		LOCATION - CITY OR TOWN AND STATE NORTHLAKE, IL	DATE OF DISPOSITION JULY 24, 2018
FUNERAL HOME CONBOY-WESTCHESTER FUNERAL HOME 1001 CERMAK RD, WESTCHESTER, IL 60154				
FUNERAL DIRECTOR'S NAME FRANK REDA			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011743	
LOCAL REGISTRAR'S NAME ELIZABETH A PECHOUS			DATE FILED WITH LOCAL REGISTRAR JULY 24, 2018	
CAUSE OF DEATH	PART I	MULTIPLE MYELOMA		
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a			
	b	Due to (or as a consequence of)		
	c	Due to (or as a consequence of)		
		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
				YEARS
FEMALE PREGNANCY STATUS NOT APPLICABLE			WAS AN AUTOPSY PERFORMED? NO	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
			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? YES	DATE LAST SEEN ALIVE JULY 20, 2018	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 10:52 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED JULY 23, 2018	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH JANICE MAKELA, 3249 OAK PARK AVENUE, BERWYN, ILLINOIS, 60402				PHYSICIAN'S LICENSE NUMBER 036-105343

0386383



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

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM