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\*1922041060\*

Doc# 1922041060 Fee \$88.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 08/08/2019 11:10 AM PG: 1 OF 3

Property of Cook County Clerk's Office

COVER LETTER

AFFIDAVIT

File:

ADDRESS: 3916 N. ORIOLE AVE.

CHICAGO, IL 60634

PIN NUMBER: 12-24-102-033-0000

AFTER RECORDING RETURN TO: National Title Solutions, Inc

3550 Hobson Road Suite 101

Woodridge, IL 60517

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## DECEASED JOINT TENANT AFFIDAVIT

STATE OF ILLINOIS                    }  
   }  
 COUNTY OF COOK                    }

Date: July 27, 2019

SS

RAMON S. ONG, being first duly sworn, deposes and says;

1. That he resides at: 3916 N. Oriole Avenue, Chicago, IL 60634.
2. That he is the brother and one of the surviving joint tenants of Divinia S. Ong, who died on November 18, 2017, as evidenced by the attached certified copy of the death certificate.
3. That said decedent was one of the owners of the land described as:

Lot 31 in Block 1 in Volk Brothers Mahler Estates, being a Subdivision in the Northwest Quarter, North and South of the Indian Boundary Line of Section 24, Township 40 North, Range 12, East of the Third Principal Meridian, in Cook County, Illinois.

Permanent Tax No:           12-24-102-033-0000  
 Commonly known as:       3916 N. Oriole Avenue, Chicago, Illinois 60634.

4. That said decedent died leaving a last Will and Testament, and which is being probated in the Probate Division of the Circuit Court of Cook County, Illinois, as Case Number 2018 P 000196.
5. That no State of Illinois Inheritance Tax/Estate Tax or Federal Estate Tax is due.

Ramon S. Ong  
 Affiant

Subscribed and sworn to before me this 27<sup>th</sup> day of July, 2019.

Notary Public Frank M. Anselmo Jr



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**COOK COUNTY CLERK VITAL RECORDS  
CHICAGO, ILLINOIS  
MEDICAL CERTIFICATE OF DEATH**

STATE FILE NUMBER 2017 0092765

DATE ISSUED 7/19/2019

DECEDENT'S LEGAL NAME DIVINIA SANCHEZ ONG		SEX FEMALE	DATE OF DEATH NOVEMBER 18, 2017		
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 73 YEARS	DATE OF BIRTH OCTOBER 01, 1944			
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME PRESENCE RESURRECTION MEDICAL CENTER			
PLACE OF DEATH INPATIENT					
BIRTHPLACE PHILIPPINES	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH NEVER MARRIED/NEVER IN CIVIL UNION	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME	EVER IN U.S. ARMED FORCES? NO	
RESIDENCE 3916 N ORIOLE	APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES		
COUNTY COOK	STATE IL	ZIP CODE 60634	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JOSE ONG	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MARTA SANCHEZ	
INFORMANT'S NAME CARLOS ONG		RELATIONSHIP BROTHER	MAILING ADDRESS 3416 N NATOMA, CHICAGO, IL, 60634		
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION ACACIA PARK CEMETERY	LOCATION - CITY OR TOWN AND STATE CHICAGO, IL	DATE OF DISPOSITION NOVEMBER 24, 2017	
FUNERAL HOME CUMBERLAND CHAPELS, 8300 W LAWRENCE AVE, NORRIDGE, IL, 60706					
FUNERAL DIRECTOR'S NAME ROBERT C. SNIDER			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015105		
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR NOVEMBER 22, 2017		
CAUSE OF DEATH		PART I		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a. CHRONIC RENAL FAILURE			1 YEARS
		b. CARDIORENAL SYNDROME			3 YEARS
		c.			
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I:					
			WAS AN AUTOPSY PERFORMED? NO		
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A		
FEMALE PREGNANCY STATUS NOT PREGNANT WITHIN LAST YEAR			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 NOVEMBER 17, 2017	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 06:31 AM	
CERTIFIER PHYSICIAN			DATE CERTIFIED NOVEMBER 20, 2017		
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH ASHOK SAWLANI, 7447 W TALCOTT, 304, CHICAGO, ILLINOIS, 60631				PHYSICIAN'S LICENSE NUMBER 36.088986	

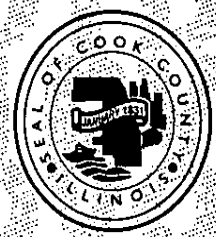
THE WORD VOID APPEARS WHEN PHOTOCOPIED

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.

*Karen A. Yarbrough*  
Karen A. Yarbrough  
Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

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