UNOFFICIAL COPY

DECEASED JOINT TENANCY AFFIDAVIT



Doc# 1931117070 Fee \$88.00

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

EDHARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 11/07/2019 11:23 AM PG: 1 OF 3

State of Illinois) SS County of Cook)

The undersigned affiant, being duly sworn, on oath states:

- 1. That she resides at 1258 W. Lexington, Chicago, Illinois.
- 2. That she is a joint tenant with her husband, FREDERIC G. HOGAN, deceased, who, at the time of his death, was one of the owners of the property in Cook County, State of Illinois (the "Real Property"), described as follows:

THE EAST TWELVE FEET AND TWO INCHES OF LOT 22 AND THE WEST EIGHT FEET SIX AND ONE QUARTER INCHES OF LOT 23 IN MACALESTER'S SUBDIVISION OF BLOCK 5 OF VERNON PARK ADDITION TO CHICAGO IN THE EAST HALF OF THE SOUTHWEST QUARTER OF SECTION 17, TOWNSHIP 39 MORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLING 15.

Permanent Index Number:

17-17-310-023-0000

Property Address:

1258 West Lexington, Chicago, Illinois 59607

3. That FREDERIC G. HOGAN died on August 9, 2019, as evidenced by the certified copy of his death certificate which is attached hereto.

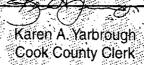


CHICAGO; ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER: 2019 0063115	DATE ISSUED \$115/2		
DECEDENT'S LEGALNAME FREDERIC G HOGAN	SEX DATE OF DEATH® AMALE AUGUST 09, 2019		
COUNTY OF DEATH AGE AT LAST BIRTHDAY COOK 772 YEARS	DATE OF BIRTH JULY 29, 1947		
[1] "我们就是我们就是是我的人们的特殊的,我们就没有的人的,我们也没有一个人的人的,我们就没有一个人的人的。""我们是我们的,我们也不是不是我们的。""我们	ROTHER INSTITUTION NAME LEXINGTON ST		
PLACE OF DEATH AND DECEDENT'S HOME			
BIRTHPLACE 3/ SOCIAL STOLEHTY ATMBER STATUS AT TIME OF DEATH EVERGREEN PARK IL 253-38-2295 MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME EYER IN U.S. ARMED MARY BETH BARRY FORCES! NO		
RESIDENCE APT. NO. 1258 W.LEXINGTON S.	TY OR TOWN INSIDE CITY LIMITS?		
COUNTY STATE ZIP CODE FATHERICO PARENTS NAME PRIOR TO FIRST MARK	ARRIAGE/OWIL UNION MOTHER/CO PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JANE F. RUMPF		
INFORMANTS NAME : RELATIONSHIP : MARY BETH HOGAN : WIFE	MAILING ADDRESS 1258 W LEXINGTON ST, CHICAGO, IL, 60607		
METHOD OF DISPOSITION LACE OF DISPOSITION. BURIAL QU'LIN OF HEAVEN CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE DATE OF DISPOSITION		
FUNERAL HOME DRECHSLER BROWN AND WILLIAMS FUNE & L HOME, 203 S MARION ST			
EUNERAL DIRECTOR'S NAME *** CHARLES MICHAEL WILLIAMS	FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034012154		
LOCAL REGISTRAR'S NAME KAREN'A YARBROUGH	DATE FILED WITH LOCAL REGISTRAR AUGUST 12, 2019		
CAUSE OF DEATH PART I SEVERE AORTIC STENOSIS			
(Final disease of chindition Due to (or as a c niseque, ce of) resulting in death) b.	• oi)		
Oue to (or as a consequence or	APROXIMATE INTERVAL BETWEED ONSET AND DEATH		
Cocise for as a contectuence on	2 ő		
Due to (or as a consequence of)			
PART II Enter other significant conditions contributing to death but not resulting in the underlying cause. ALZHEIMERS DEMENTIA	WAS AN AUTORSY PERFORMED? NO WERE AUTORSY FINDINGS USED TO		
FEMALE PREGNANCY STATUS	COMPLETE CAUSE OF DEATH? N/A MANNER OF DEATH		
NOT APPLICABLE DATE OF INJURY PLACE OF INJURY PLACE OF INJURY	INA TURAL INJURY AT WORK?		
LOCATION OF INJURY			
DESCRIBE HOW INJURY OCCURRED:	IF TRANSPOR ATH WINJURY, SPECIPY		
ATTEND THE DECEASED? DATE LAST SEENALIVE WAS MEDICAL EXAMINER OR YES: JANUARY 10, 2019 CORONER CONTACTED? NO	DATE PRONQUINCED TIME OF DEATH 10:02 AM		
CERTIFIER Q PHYSICIAN	DATE CERTIFIED AUGUST 09, 2019		
NAME ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH POONAM GHANSHYAM MERAL 1725 W. HARRISON ST., CHICAGO, ILLING	PHYSICIAN'S LICENSE NUMBER		
	NOIS: 60612 036136 150 6 6 3 0 8		



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.





UNOFFICIAL COPY

- 4. That she is the surviving joint tenant of the Real Property.
- 5. Affiant further states naught.

Mary BETH HOGAN [SEAL

State of Illinois)	
)	SS
County of Cook)	

I, the undersigned, a Notary Public in and for said County, in said State, DO HEREBY CERTIFY that MARY BFIH HOGAN, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that she has signed, sealed and delivered the said instrument as her free and voluntary act, for the uses and purposes therein set forth.

GIVEN under my hand and notativity seal this $\frac{331}{2}$ day of $\frac{31}{2}$

JOHN G MOORE

Official Seal
Official Seal
Notary Public - State of Illinoils
Notary Public

Notary Public

Commission expires: /- 7- 2022

After Recording Mail To:

2019.

Karen A. Kuhn, Esq. Madden, Jiganti, Moore & Sinars 190 S. LaSalle Street Suite 1700 Chicago, IL 60603 (312) 346-4101