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SPECIAL NOTICE:

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



Doc# 1935313098 Fee \$88.00

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

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 12/19/2019 02:18 PM PG: 1 OF 3

DECEASED JOINT TENANCY AFFIDAVIT

INSTRUMENT PREPARED BY:

A. MAGGIO (NAME)

7819 W. LAWRENCE (ADDRESS)

NORRIOL, ILLINOIS 60706 (CITY/STATE)

60706-0000 (ZIP CODE)

1 Violet BYRNE the surviving tenant of the joint tenancy created by the deed with document number: 86428238

do hereby declare under oath that the joint tenant, DOROTHY BYRNE died on 3/28/1997 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

the Property Identification Number (PIN) of:

12-28-303008-0000

& the Commonly Known Address of:

10150 NEVADA AV
FRANKLIN PARK, ILL
60131

Furthermore, the deceased tenant died:

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 _____

Notary & Affiant Signature Section

Subscribed and sworn to me by:

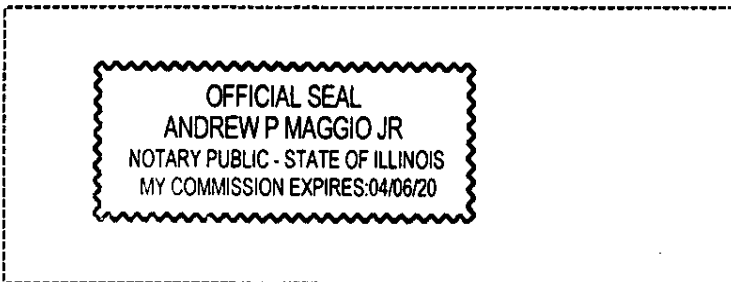
Violet BYRNE (Printed Name of Affiant)

this: 12 day of Dec, 2019

[Signature]
NOTARY PUBLIC SIGNATURE

[Signature]
AFFIANT/SURVIVING TENANT SIGNATURE

AFFIX NOTARY STAMP BELOW



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UNOFFICIAL COPY

REGISTRATION NO. 160
 REGISTERED NUMBER

STATE OF ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE RECORD NUMBER

DECEASED-NAME **DOROTHY BYRNE** FIRST MIDDLE LAST SEX **Female** DATE OF DEATH (MONTH, DAY, YEAR) **March 28, 1997**

1. COUNTY OF DEATH **Cook** AGE-LAST BIRTHDAY (YRS) **82** UNDER 1 YEAR UNDER 1 DAY UNDER 1 MIN DATE OF BIRTH (MONTH, DAY, YEAR) **December 13, 1914**

4. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER **Cook** 5a. **82** 5b. **82** 5c. **82** 5d. **December 13, 1914** 5e. **December 13, 1914**

6a. **Franklin Park** 6b. **10150 Nevada** NAME OF SURVIVING SPOUSE (M, D, F, WIFE) **None** 9. **No** WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO)

7. **Chicago 11** 8a. **Widowed** 8b. **None** KIND OF BUSINESS OR IND. (STR) **None** 12. **8** EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) **College (1-4 of 5 + 1)**

10. **348-12-4094** 11a. **Home Maker** 11b. **Own Home** 13c. **Yes** INSIDE CITY (YES/NO) **Yes** 13d. **Cook** COUNTY

13a. **6275 Northwest Highway** 13b. **Chicago** 14a. **White** 14b. **White** 14c. **White** 14d. **White** 14e. **White**

13e. **Illinois** 13f. **60631** 14a. **White** 14b. **White** 14c. **White** 14d. **White** 14e. **White**

FATHER-NAME **Ralph Battersby** MOTHER-NAME **Anna Fahey**

15. **Informant Name (Type or Print)** **Ralph Battersby** 16. **Relationship** **Daughter** 17. **10150 Nevada Franklin Park IL 60131**

17a. **Violet Byrne** 17b. **1711 W. 17th St. Chicago, IL 60648** 17c. **10150 Nevada Franklin Park IL 60131**

18. PART I. Immediate Cause (Final disease or condition resulting in death) **METASTATIC CARCINOMA OF COLON**

19. (a) **2 YEARS** (b) **2 YEARS** (c) **2 YEARS**

PART II. Other significant conditions contributing to or resulting in the underlying cause given in PART I.

END STAGE EMPHYSEMA

DATE OF OPERATION, IF ANY

20a. **None** 20b. **None** 20c. **None**

21a. **None** 21b. **None** 21c. **None**

22a. SIGNATURE OF DECEASED **Dorothy Byrne**

22b. SIGNATURE OF CERTIFIER **Oscar Ostmani**

22c. NAME AND ADDRESS OF CERTIFIER **Oscar Ostmani MD 747 W Talcott Chicago, IL 60631**

22d. ILLINOIS LICENSE NUMBER **036-036213**

23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)

24. BURIAL REMOVAL (SPECIFY) **240 Oakridge Cemetery**

25a. **Cuneo-Columbian Funeral Home 10300 W Grand Avenue Franklin Park Illinois 60131**

25b. **Chas W Freeman**

25c. **Karen L. Scott, M.D.**

26a. **APR 02 1997**

26b. **APR 02 1997**

26c. **034-012345**

26d. **APR 02 1997**

26e. **APR 02 1997**

26f. **APR 02 1997**

26g. **APR 02 1997**

26h. **APR 02 1997**

26i. **APR 02 1997**

26j. **APR 02 1997**

26k. **APR 02 1997**

26l. **APR 02 1997**

26m. **APR 02 1997**

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent in item 1 and that this record was established and filed in my office in accordance with the provisions of Illinois statutes relating to the registrar of birth, stillbirth and death.

APR 01 1997

Signed *Nature The County* Official Title Deputy Registrar

At Cook County Department of Public Health 1010 Lake Street Suite 300 Oak Park, Illinois 60301

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LEGAL DESCRIPTION

LOT TEN IN BLOCK 3 IN UNIT NO. 2 WESTBROOK PARK ESTATES BEING A
SUBDIVIISON OF PART OF THE EAST 1526 FEET OF THE SOUTH ½ OF
THE SOUTHWEST ¼ OF SECTION 28, TOWNSHIP 40 NORTH, RANGE 12
EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 12-28-303-008-0000

ADDRESS: 10150 NEVADA AVENUE, FRANKLIN PARK, ILLINOIS 60131

Property of Cook County Clerk's Office