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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.

DECEASED JOINT TENANCY AFFIDAVIT

INSTRUMENT PREPARED BY:

LAW OFFICE OF KATARZYNA SAK, (NAME)
P.C.
7720 W. TOUCHY AVE (ADDRESS)
CHICAGO, IL (CITY/STATE)
60631 - (ZIP CODE)



Doc# 2007616023 Fee \$88.00

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

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 03/16/2020 11:36 AM PG: 1 OF 3

I CZESLAWA MADON the surviving tenant of the joint tenancy created by the deed with document number: 89515353
do hereby declare under oath that the joint tenant, TADEUSZ MADON died on 11/22/2019 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 LEGAL DESCRIPTION

the Property Identification Number (PIN) of:

13 - 19 - 422 - 002 - 0000

& the Commonly Known Address of:

6555 W. ROSCOE ST.
CHICAGO, IL 60634

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:

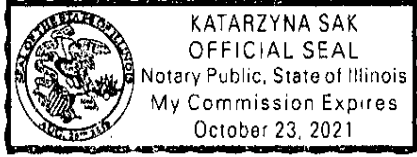
CZESLAWA MADON (Printed Name of Affiant)

this: 9th day of MARCH, 2020

Katarzyna Sak
NOTARY PUBLIC SIGNATURE

Prashona Madon
AFFIANT/SURVIVING TENANT SIGNATURE

AFFIX NOTARY STAMP BELOW



SC
 INT
 1/3
 2/3
 3/3

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COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2019 0093100


DATE ISSUED 11/27/2019

DECEDENT'S LEGAL NAME TADEUSZ MADON		SEX MALE	DATE OF DEATH NOVEMBER 22, 2019	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 68 YEARS	DATE OF BIRTH JULY 15, 1951		
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME 6555 W ROSCOE STREET		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE POLAND	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME CZESLAWA MIETKA	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 6555 W ROSCOE STREET	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 JOZEF MADON	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JANINA JAKALA
INFORMANT'S NAME CZESLAWA MADON		RELATIONSHIP WIFE	MAILING ADDRESS 6555 W ROSCOE STREET, CHICAGO, IL, 60634	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION MARYHILL CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE NILES, IL	DATE OF DISPOSITION NOVEMBER 27, 2019	
FUNERAL HOME COLONIAL-WOJCIECHOWSKI FH, 6250 N. MILWAUKEE AVENUE, CHICAGO, IL, 60646				
FUNERAL DIRECTOR'S NAME ALLAN OSTROWSKI			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015127	
LOCAL REGISTRAR'S NAME KAREN A. YARBROUGH			DATE FILED WITH LOCAL REGISTRAR NOVEMBER 25, 2019	
CAUSE OF DEATH				
PART I: UNKNOWN IMMEDIATE CAUSE OF DEATH				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.	APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
		b.		
		c.		
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I: HYPERTENSION, TYPE I DIABETES, HYPERCHOLESTEROLEMIA				
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 NOVEMBER 19, 2019	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 09:25 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED NOVEMBER 25, 2019	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH JOANNA K. KELLEY, MD, 5751 W BELMONT AVE, CHICAGO, ILLINOIS, 60634			PHYSICIAN'S LICENSE NUMBER 036-099834	

1154847



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
 Cook County Clerk



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LEGAL DESCRIPTION

Lot 3 in Block 5 in Oliver L. Watson's Subdivision of the West 1/2 of the Block 5 in Severn's Roscoe Street Subdivision of 748.5 Feet West of and adjoining the South 748.5 Feet North of that part of the South East 1/4 also Lot 157 in Oliver L. Watson's 2nd Belmont Avenue Addition to Chicago in the South East 1/4 of Section 19, Township 40 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois.

Property of Cook County
COOK COUNTY
RECORDER OF DEEDS
Clerk's Office