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Doc# 2018308076 Fee \$93.00

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

EDWARD M. HOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 07/01/2020 12:08 PM PG: 1 OF 2

DECEASED JOINT TENANCY AFFIDAVIT

State of Illinois)
) SS.
County of Will)

JOHN M. CATIZONE, hereinafter called Affiant(s) being duly sworn states that he resides at: 9204 S. Parkside Ave., Oak Lawn, IL 60453. That Affiant was acquainted with NANCY CATIZONE, hereinafter referred to as Deceased, and at the time of Decedent's death, was one of the owners of the land in Cook County, Illinois, described as:

Lot 155 in Elmore's Parkside Terrace, being a Subdivision of the East 1/2 of the Southeast 1/4 of Section 5, Township 37 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois.

Permanent Index Number: 24-05-407-014-0000
CKA: 9204 S. Parkside Ave., Oak Lawn, IL 60453

That the Deceased died on Oct. 13, 2019, as evidenced by the Deceased's death certificate attached hereto. That the Deceased, at the time of her death, held her share of the above-mentioned property as a joint tenant.

Subscribed and sworn before me
this March 17, 2020.

Danielle Szczucki
Notary Public

John M. Catizone
JOHN M. CATIZONE, Affiant

This instrument prepared by and return to:
Robert J. Zopolis, Zopolis & Associates, 9991 191st Street, Mokena, IL 60448



CERTIFICATION OF DEATH RECORD**UNOFFICIAL COPY**

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER: 2019 0081208

DATE ISSUED 10/16/2019

| | | | | |
|--|--|--|---|--|
| DECEDENT'S LEGAL NAME NANCY CATIZONE | | SEX FEMALE | DATE OF DEATH OCTOBER 13, 2019 | |
| COUNTY OF DEATH COOK | AGE AT LAST BIRTHDAY 57 YEARS | DATE OF BIRTH NOVEMBER 24, 1961 | | |
| CITY OR TOWN OAK LAWN | | HOSPITAL OR OTHER INSTITUTION NAME 9204 S PARKSIDE AVENUE | | |
| PLACE OF DEATH DECEDENT'S HOME | | | | |
| BIRTHPLACE CHICAGO, IL | SOCIAL SECURITY NUMBER 333-64-3470 | STATUS AT TIME OF DEATH MARRIED | SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME JOHN CATIZONE | EVER IN U.S. ARMED FORCES? NO |
| RESIDENCE 9204 S PARKSIDE AVENUE | | APT. NO. | CITY OR TOWN OAK LAWN | INSIDE CITY LIMITS? YES |
| COUNTY COOK | STATE IL | ZIP CODE 60453 | FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION NINO CAPELLUPO | MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION CARMELA SCALISE |
| INFORMANT'S NAME JOHN CATIZONE | | RELATIONSHIP HUSBAND | MAILING ADDRESS 9204 S PARKSIDE AVENUE, OAK LAWN, IL 60453 | |
| METHOD OF DISPOSITION BURIAL | PLACE OF DISPOSITION HOLY SEPULCHRE CATHOLIC CEMETERY | LOCATION - CITY OR TOWN AND STATE ALSIP, IL | DATE OF DISPOSITION OCTOBER 18, 2019 | |
| FUNERAL HOME CHAPEL HILL GARDENS SOUTH FUNERAL HOME, 11333 S CENTRAL AVENUE, OAK LAWN, IL 60453 | | | | |
| FUNERAL DIRECTOR'S NAME VINCENT G. GIFF | | | FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034012014 | |
| LOCAL REGISTRAR'S NAME KAREN A. YARBROUGH | | | DATE FILED WITH LOCAL REGISTRAR OCTOBER 16, 2019 | |
| CAUSE OF DEATH - PART I: NON-SMALL CELL LUNG CANCER | | | | |
| IMMEDIATE CAUSE (Final disease or condition resulting in death) | | Due to (or as a consequence of) | | APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH 3 YEARS |
| a | | b | | |
| 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. | | | 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? NO | DATE LAST SEEN ALIVE UNKNOWN | WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO | DATE PRONOUNCED | TIME OF DEATH 10:25 PM |
| CERTIFIER PHYSICIAN | | | DATE CERTIFIED OCTOBER 14, 2019 | |
| NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH JAMES P. VALEK, MD, 606 POTTER, DES PLAINES, ILLINOIS, 60016 | | | PHYSICIAN'S LICENSE NUMBER 03608211164526 | |

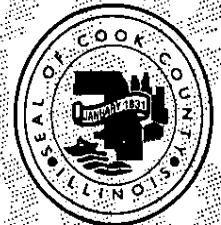
THE WORD VOID APPEARS WHEN PHOTOCOPIED

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