## Prepared by and Mail to:

## **UNOFFICIAL COP**



Charles W. Galey Attorney at Law 6965 W. 111th St. Worth, IL 60482 Doc# 2033862146 Fee \$93.00

RHSP FEE:\$9,00 RPRF FEE: \$1.00

EDWARD M. HOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 12/03/2020 03:44 PM PG: 1 OF 2

Old Republic Title 9601 Southwest Highway Oak Lawn, IL 60453						
2021114 1/3	DECEASED JOINT TEN	ANCY AFFIDAVIT				
STATE OF ILLINOIS COUNTY OF COOK	Old Republic National Title Insurance Con File Number: 201					
O		es at 6222 West 124th Street, in the	City of Palos Heights,	,		
		o, at the time of her death, was one o et, Palos Heights, Illinois 60463, and		ıd in		
		THE NORTHWEST 1/4 OF THE S IE THIRD PRINCIPAL MERIDIAN		Y,		
Permanent Index Number: 24-29-	300-028-0000					
That the deceased died on Decem hereto.	ber 12, 2018 as evidenced by a ce	tiffed copy of a death certificate of	the deceased attached	l		
CHECK ONE:		9				
That the deceased died:		C				
Leaving no Last Will & Testa	ament; or	14,	•			
Leaving a Last Will & Testar Clerk of the Probate Division		hereto. The original of the uncrover County, Illinois; or	will should be filed v	vith the		
	ment which was filed in the Unpro Illinois on or about	oven Will Box of the Probate Division	on of the Circuit Court	of		
		al and personal property owned by the of the death of the deceased, does not				
Affiant makes this affidavit for th Policy, describing the above ment		lic National Title Insurance Compan	y to issue its Title Ins	S		
Subscribed and sworn to before m	ne by the said Joseph A. Murzansk	ci, Affiant, this <u>7</u> day of Septem	ıber, 2020.	P_2		
Charles W. Ha	ilez	Joseph a Margo	unhl	S_V		
Notary Public	OFFICIAL SEAL "	Joseph K. Murzanski, Affiant)		SC		
CH.	ARLES'W GALEY PUBLIC, STATE OF ILLINOIS mmission Expires 7-20-2022			E		
<del></del>				IIV I V		

2033862146 Page: 2 of 2

## **UNOFFICIAL COPY**

(STATE OF ILLINOIS)
County of Cook)

Karen A. Yarbrough County Clerk

December 14, 2018

I, Karen A. Yarbrough, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County do herby certify that the attached is the true and correct copy of the original Record on file, all of which appears from the records and files in my office. IN WITNESS THEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the City of Chicago, in said County.

Cook County Clerk

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

STATE FILE NUMBER 26	2018 0100381			•				DATI	E ISSUED	12/14/201
DECEDENT'S LEGAL NATIE JANIS ANNE MUTAZ		-				SEX FEMAI		TE OF DEATH ECEMBER	i	12/14/20
COOK	20		AT LAST BIRTHDAY	(Y	DATE OF			- CLIVIDE.	. 12, 2010	<del></del>
CITY OR TOWN OAK LAWN	0	· · · · · · · · · · · · · · · · · · ·		HOSPITAL OR O'	THER INSTITUTION	ON NAME		<del></del>		
PLACE OF DEATH INPATIENT				1 /10/00	CONTO I III.	DIOAL OL	NIER	····		
BIRTHPLACE CHICAGO, IL		SECU', ITY NUMBE	ER STATUS AT T		SURVIVING SPO		ON PARTNER'S M	AIDEN NAME	EVER IN U.S	
RESIDENCE 6222 WEST 124TH S		(	-0		ITY OR TOWN PALOS HEIGH		J. (.	1	INSIDE CITY LI	· · · · · · · · · · · · · · · · · · ·
соок	STATE ZIP C		CO PAPLAMENAME PHAN SI VAL	E PRIOR TO FIRST MARRIA	AGE/CIVIL UNION		O-PARENT'S NAM	E PRIOR TO FI		CIVIL UNION
	DRMANT'S NAME DSEPH MURZANSKI			RELATIONSHIP MAILING ADDRE HUSBAND 6222 WEST 12			SS 4TH STREET, PALOS HEIGHTS, IL, 60463			
METHOD OF DISPOSITION CREMATION		PLACE OF DISE MAPLE LA	POSITION AKES CREMA	ATOR.UM	LOCATION - CI JUSTICE, IL	ITY OR TOWN		DATE OF	DISPOSITION MBER 14, 2	
FUNERAL HOME PALOS GAIDAS FUN	NERAL HOME	E, 11028 SOU <sup>⊤</sup>	THWEST HIG	SHWAY, PALOS					10211 . 1, 2	0.10
FUNERAL DIRECTOR'S NAME DAVID GAIDAS	E				7		DIRECTOR'S I	ILLINOIS LICE	ENSE NUMBE	R .
LOCAL REGISTRAR'S NAME KAREN A YARBROU	JGH				C	DATE FILE	ED WITH LOCA EMBER 14,	L REGISTRA 2018	R	
CAUSE OF DEATH P, IMMEDIATE CAUSE (Final disease or condition	PARTI PERITO	ONEAL CARCING			, C	- 1/L		WEEN SATH		
resulting in death)	b. OVARIA	AN CANCER WIT	TH BRCA 2 GEN	o (or as a consequence of): NE, METASTATIC		(	ROXIM	RVAL BETY	, 5 Y	EARS
	c. 			o (or as a consequence of):				SVE		<del></del> -
PART II. Enter other significant	or conditions con	tributing to death	Due to r	(or as a consequence of):			<del></del>	(2)		
SMALL BOWEL OBSTU	ICTION, PYLOI	RIC OUTLET OB	out not resulting in STRUCTION	n the underlying cause g	jiven in PART I.		WAS AN AUT		ORMED? NO	)
FEMALE PREGNANCY STATUS			-		<u> </u>			CAUSE OF DE		<del></del>
DATE OF INJURY	THIN LAGE TE	TIME OF IN	JURY	PLACE OF INJURY			NATURA	<u>L</u>	INJURY AT V	WORK?
LOCATION OF INJURY			<del></del>	<u> </u>						
DESCRIBE HOW INJURY OCCU	URRED;						IE TE			<del></del>
				•			#* in	(ANSPUKTAT	TION INJURY,	SPECIFY:
ATTEND THE DECEASED? YES	DATE LAST S DECEM	SEEN ALIVE IBER 11, 2018	WAS MEDICAL CORONER CON	EXAMINER OR INTACTED? NO	DATE P	RONOUNCE	<u> </u>		TIME OF DEAT	
CERTIFIER PHYSICIAN			· ·					E CERTIFIED	01:15 AM R 13, 2018	
NAME, ADDRESS AND ZIP COL LUBOMYRA KAZANIV	DE OF PERSON O WSKYJ, 1174	COMPLETING CAU	SE OF DEATH	OS HEIGHTS II.	UNIOIS EDVE	3		PHYSICIAN'S I	LICENSE NUM	
			<del></del>	00.12.00, .2.	-114010, 0040	J	1	0360691	.75	