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Doc# 2100413210 Fee \$88.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 01/04/2021 11:48 AM PG: 1 OF 3

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS)
COUNTY OF COOK) SS.

MARIA N. VASQUEZ being duly sworn states that he/she resides at 1612 W. Cullerton, in the City of Chicago, State of Illinois.

That she was acquainted with Francisco J. Vasquez (deceased) who, at the time of his death, was one of the owners of the land in Cook County, Illinois, commonly known as 1612 W Cullerton, Chicago, Illinois and legally described as follows:

LOT 48 IN STINSON'S SUBDIVISION OF THE NORTH HALF OF BLOCK 49 IN SECTION 19, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PN: 17-19-417-038-0000

That the deceased died on December 7, 2019, as evidenced by a certified copy of a death certificate of the deceased attached hereto.

CHECK ONE:

That the deceased died: Leaving no Last Will & Testament; or

~~Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven will should be filed with the Clerk of the Probate Division of the Circuit Court of _____ County, Illinois; or~~

~~Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of Cook County, Illinois on or about.~~

That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually, in joint tenancy or tenancy by the entirety at the time of the death of the deceased, does not exceed the sum of \$150,000.00.

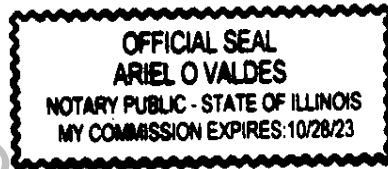
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Affiant makes this affidavit for the purpose of inducing Title Company to issue its Title Insurance Policy, describing the above-mentioned property.

Subscribed and sworn to before me this 11 day of May,
2020

Ariel Valdes
(Affiant's Signature)

Ariel O. Valdes
Notary Public



Prepared By:

Ariel Valdes, 211 W Wacker, #750, Chicago IL 60606

mail to
Ariel Valdes
211 W Wacker
Chicago IL 60606
Suite 750

Property of Cook County Clerk's Office

CERTIFICATION OF DEATH RECORD

UNOFFICIAL COPY

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2019 0101133

DATE ISSUED 1/9/2020


DECEDENT'S LEGAL NAME FRANCISCO JAVIER VAZQUEZ		SEX MALE	DATE OF DEATH DECEMBER 07, 2019	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 92 YEARS	DATE OF BIRTH FEBRUARY 20, 1927		
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME 1612 W CULLERTON		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE MEXICO	SOCIAL SECURITY NUMBER 357-42-7578	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME MARIA NATIVIDAD MARTINEZ	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 1612 W CULLERTON	APT. NO.	CITY OR TOWN CHICAGO		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60608	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION LEODARDO VAZQUEZ	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION IRENE NIETO
INFORMANT'S NAME FRANK VAZQUEZ		RELATIONSHIP SON	MAILING ADDRESS 496 S STRATFORD, ELMHURST, IL, 60126	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION RESURRECTION CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE JUSTICE, IL	DATE OF DISPOSITION DECEMBER 13, 2019	
FUNERAL HOME SZYKOWNY FUNERAL HOME LTD., 4901 S ARCHER AVE., CHICAGO, IL, 60632				
FUNERAL DIRECTOR'S NAME JONATHAN F SIEDLECKI			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011163	
LOCAL REGISTRAR'S NAME KAREN A YARBROUGH			DATE FILED WITH LOCAL REGISTRAR DECEMBER 23, 2019	
CAUSE OF DEATH PART I. CEREBRAL INFARCTION IMMEDIATE CAUSE (Final disease or condition resulting in death) a. _____ Due to (or as a consequence of) b. CEREBRAL ATHEROSCLEROSIS _____ Due to (or as a consequence of) c. _____ Due to (or as a consequence of)				
PART II: Enter other <i>significant conditions contributing to death</i> 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 APPLICABLE			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 11:50 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED DECEMBER 10, 2019	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH CHRISTINE SCHARTZ PETERSON, 405 LAKE ZURICH ROAD, BARRINGTON, ILLINOIS, 60010				PHYSICIAN'S LICENSE NUMBER 036087005 1206628

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
 Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE