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2106457014

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 03/05/2021 09:55 AM PG: 1 OF 2

2128274 lbfz

SPECIAL NOTICE:

This form is NOT required by law, nor the Cook County Recorder of Deeds (CCRD). CCRD employees CANNOT assist with the preparation of this, or ANY LEGAL FORM.

PREPARED BY:

Caesar Z. Styka, P.C.

15 Spinning Wheel Rd., Suite 236

Hinsdale, Illinois 60521-2984

SURVIVING TENANT AFFIDAVIT

I, ELZBIETA KACZOROWSKI the surviving tenant of the tenancy created by the deed with the document number: 0020116065 do hereby declare under oath that the tenant Zygmunt Kaczorowski died on January 8, 2021 as evidenced by the attached certified copy of her/his death certificate (see attached).

I also declare that the aforementioned tenant was an owner of property with the following details: Unit 308 in Country Homes of Beck Lake Woods Condominium as delineated on a Survey of the following described real estate:

Part of the East 1/2 of the North East 1/4 of Section 9, Township 41 North, Range 12 East of the Third Principal Meridian, lying West of the Westerly Line of Illinois Toll Road and Part of Lot 1 in Leverentz Subdivision lying West of the Westerly Line of Illinois Toll Road, which survey is attached as Exhibit "D" to the Declaration of Condominium recorded as Document Number 27402543 together in its undivided percentage interest in the common elements in Cook County, Illinois.

PROPERTY IDENTIFICATION NUMBER (PIN)

0 9 - 0 9 - 2 0 1 - 0 5 6 - 1 0 2 4

COMMONLY KNOWN ADDRESS:

308 Country Ln.

Des Plaines, Illinois 60016

AFTER RECORDING, MAIL TO:

SATURN TITLE, LLC
1030 W. HIGGINS RD.
SUITE 305
PARK RIDGE, IL 60068

NOTARY & AFFIANT SIGNATURE SECTION BELOW

Subscribed & Sworn to me by:

ELZBIETA KACZOROWSKI

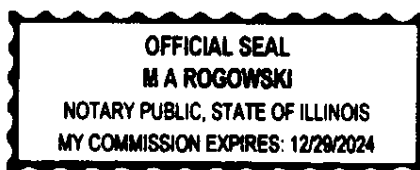
Affiant Signature:

[Handwritten signature of Elzbieta Kaczorowski]

On the Following Date:

February 25, 2021

[Handwritten signature of Notary Public]



CERTIFICATION OF DEATH RECORD
UNOFFICIAL COPY

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2021 0002227

DATE ISSUED 1/12/2021

DECEDENT'S LEGAL NAME ZYGMUNT KACZOROWSKI		SEX MALE	DATE OF DEATH JANUARY 08, 2021	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 77 YEARS	DATE OF BIRTH MAY 05, 1943		
CITY OR TOWN DES PLAINES		HOSPITAL OR OTHER INSTITUTION NAME 308 COUNTRY LN		
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 ELZBIETA OWCZAREK	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 308 COUNTRY LN	APT. NO.	CITY OR TOWN DES PLAINES	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60016	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION STANISLAW KACZOROWSKI	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JULIANA WIECKOWSKA
INFORMANT'S NAME ELZBIETA KACZOROWSKI		RELATIONSHIP WIFE	MAILING ADDRESS 308 COUNTRY LN, DES PLAINES, IL, 60016	
METHOD OF DISPOSITION CREMATION	PLACE OF DISPOSITION MONTROSE CEMETERY CO.	LOCATION - CITY OR TOWN AND STATE CHICAGO, IL	DATE OF DISPOSITION JANUARY 12, 2021	
FUNERAL HOME SKAJA TERRACE FUNERAL HOME, 7812 N. MILWAUKEE AVENUE, NILES, IL, 60714				
FUNERAL DIRECTOR'S NAME GORDON J. WOJDA			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011503	
LOCAL REGISTRAR'S NAME KAREN A. YARBROUGH			DATE FILED WITH LOCAL REGISTRAR JANUARY 12, 2021	
CAUSE OF DEATH		PART I	MALIGNANT NEOPLASM OF THE LUNG	
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.	Due to (or as a consequence of)	
		b.	Due to (or as a consequence of)	
		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 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 01:00 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED JANUARY 11, 2021	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH BOZENA THEODOROPOULOS, 2050 CLAIRE CT, GLENVIEW, ILLINOIS, 60025				PHYSICIAN'S LICENSE NUMBER 036-098347

1664550



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



THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM