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KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 03/24/2021 09:41 AM PG: 1 OF 2

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:

ELLEN A. YEARWOOD (NAME)
YEARWOOD AND ASSOC, LTD
636 S. RIVER RD #104 (ADDRESS)
DES PLAINES, IL (CITY/STATE)
60016-4624 (ZIP CODE)

CARISSA WENDT, fka
I CARISSA D. BENEDIK the surviving tenant of the joint tenancy created by the deed with document number: 0623650020
do hereby declare under oath that the joint tenant, ANDREW D. WENDT died on 2/6/17 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:

LOT 83 IN WASHINGTON HIGHLAND ADDITION TO PALATINE IN THE NORTH WEST 1/4 OF NORTHWEST 1/4 OF SECTION 23, TOWNSHIP 42 NORTH, RANGE 10, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO PLAT AS DOCUMENT 8949307, IN COOK COUNTY, ILLINOIS

the Property Identification Number (PIN) of:

02-23-106-024-0000

& the Commonly Known Address of:

152 S. HALE ST.
PALATINE, IL 60067

Furthermore, the deceased tenant died:



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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 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 County, in

Notary & Affiant Signature Section

Subscribed and sworn to me by:

AFFIX NOTARY STAMP BELOW

Carissa Wendt (Printed Name of Affiant)

this: 25 day of January, 2021

Ellen A Yearwood
NOTARY PUBLIC SIGNATURE

Cari Wendt
AFFIANT/SURVIVING TENANT SIGNATURE

YEARWOOD & ASSOCIATES, LTD
MAIL TO: 636 S. RIVER ROAD, #104
DES PLAINES, IL 60016-4624

"OFFICIAL SEAL"
ELLEN A. YEARWOOD
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES 07-24-2023

CERTIFICATION OF DEATH RECORD
UNOFFICIAL COPY

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

STATE FILE NUMBER 2017 0011536

DATE ISSUED 2/14/2017

DECEDENT'S LEGAL NAME ANDREW DAVIES WENDT		SEX MALE	DATE OF DEATH FEBRUARY 06, 2017	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 45 YEARS	DATE OF BIRTH DECEMBER 30, 1971		
CITY OR TOWN PALATINE		HOSPITAL OR OTHER INSTITUTION NAME 152 SOUTH HALE STREET		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE ELGIN, IL	SOCIAL SECURITY NUMBER 319-60-4532	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE, CIVIL UNION PARTNER'S MAIDEN NAME CARISSA D BENEDEK	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 152 SOUTH HALE STREET		APT. NO.	CITY OR TOWN PALATINE	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60067	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JOHN D WENDT	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION NANCY L DAVIES
INFORMANT'S NAME CARISSA B WENDT		RELATIONSHIP WIFE	MAILING ADDRESS 152 SOUTH HALE STREET, PALATINE, IL, 60067	
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION TWIN PINES CREMATORY	LOCATION: CITY OR TOWN AND STATE EAST DUNDEE, IL	DATE OF DISPOSITION FEBRUARY 10, 2017
FUNERAL HOME AHLGRIM FAMILY FUNERAL SERVICES, 201 NORTH NORTHWEST HIGHWAY, PALATINE, IL, 60067				
FUNERAL DIRECTOR'S NAME DOUGLAS R AHLGRIM			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014169	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR FEBRUARY 10, 2017	
CAUSE OF DEATH PART I: COLON CANCER				
IMMEDIATE CAUSE <small>(Final disease or condition resulting in death)</small>		a.	YEARS	
		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 <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? YES	DATE LAST SEEN ALIVE FEBRUARY 01, 2017	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 11:00 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED FEBRUARY 09, 2017	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR DEAN TSARWHAS, 27750 WEST HWY 22, BARRINGTON, ILLINOIS, 60010				PHYSICIAN'S LICENSE NUMBER 036086008

THE WORDS ID APPEAR HEREIN ARE TO BE REPRODUCED AS SHOWN

NOT REPRODUCED IN ANY MANNER WITHOUT THE WRITTEN PERMISSION OF THE CLERK OF COOK COUNTY



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.

David Orr
 David Orr
 Cook County Clerk

