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This Instidment Prepared By: Barry C. Bergstrom & Associates, Ltd. 3330 - 181st Place Lansing, IL 60438

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

Doc# 2127219029 Fee \$88.00

KAREN A. YARBROUGH COOK COUNTY CLERK

DATE: 09/29/2021 01:22 PM PG: 1 OF 3

MAIL TO:

Barry C. Bergstrom & Assoc. 3330 181st Place, Ste. 104 Lansing, Illinois 60438

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS))SS COUNTY OF COOK

The Affiant, PATRICIA KALLAS, being duly sworn states that the Affiant resides at 7710 Greenway Blvd., Unit 4 NE, Tinley Park, Illinois 60487.

That PATRICIA KALLAS was acquainted with JOHN C. STREZO, the deceased, who, at the time of his death was one of the owners of the land in Cook County, Illions hereinafter legally described:

LOT SEVENTY-FOUR (74) IN GREEN MEADOWS, A SUBDIVISION OF THE NORTH ONE HALF OF THE WEST ONE HALF (EXCEPT THE SOUTH TWO HUNDEED SIXTY-FOUR (264) FEET OF THE EAST THREE HUNDRED THIRTY (330) FEET THEREOF, OF THE SOUTHWEST ONE-QUARTER OF SECTION THIRTY-TWO (32), TOWNSHIP THIRTY-EIGHT (38) NORTH, RANGE THIRTEEN (13), EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 19-32-320-009-0000

Street Address: 8361 Merrimac Avenue, Burbank, IL 60459

That the Decedent died October 21, 2011, as evidenced by a copy of death certificate of the deceased attached hereto.

That the deceased died:

- /X/Leaving no Last Will and Testament.
- Leaving a Last Will and testament a copy of which is attached hereto. The original of the Will 11 was filed with the Clerk of the Probate Division of the Circuit Court of Cook County, Illinois and

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admitted to Probate on.

// Leaving a Last Will and Testament which was filed in the Unproved 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 Decedent, including both real and personal property owned by the Decedent either individually or in joint tenancy at the time of the death of the Decedent, does not exceed the sum of \$1,500,000.00.

Affiant makes this Affidavit for the purpose of inducing any title company to issue its title insurance policy, describing the real estate referred to above.

Dated: August 4, 2021

PATRICIA KALLAS

Subscribed and sworn to before me by the said PATRICIA KALLAS, this 4th day of August, 2021.

Barry C Bergstrom, Notary Public

BARRY C. BERGSTROM
OFFICIAL SEAL.
Notary Public - State of Illinois
My Solamission Expires Aug 01, 2024

CERTIFICATION OF DEATH RECORD

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

STATE FUE NUMBER 2011 0078611

DATE ISSUED

STATE RUMBER 2011-00/8	511			DATE ISSUED 10/26/2011
DECEDENT'S LEGAL NAME JOHN C STREZO SR			SEX MALE	DATE OF DEATH OCTOBER 21, 2011
COUNTY OF DEATH COOK	AGE AT LAST BIRTI 83 YEARS	HDAY	DATE OF BIRTH NOVEMBER 18, 1927	
CITY OR TOWN BURBANK		HOSPITAL OR OTHER 8361 SOUTH ME		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE S CHICAGO, IL	OCIAL SECURITY NUMBER STATUS 340-20-8631 MARF	- 1999 1998 - 1998 - 1984 - 1984 - 1984 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1985 - 1	RVIVING SPOUSE/CIVIL UNION PARTN BERNADETTE HOFFMAN	의 14일 전화 (전환 1994 - 전환 1995 - L
RESIDENCE 8361 SOUTH MERRILIAC		State that 1000 AND Leading	R TOWN BANK	INSIDE CITY LIMITS? YES
COUNTY STATE ZIP CODE FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ANNA PES				
INFORMANTS NAME BERNADETTE STREZO	RELATIONSHI WIFE	8.550 (1993) Webster Company (1994)	AILING ADDRESS 3361 SOUTH MERRIMAC	BURBANK, IL, 60459
METHOD OF DISPOSITION BURIAL	FLACT OF DISPOSITION ESTURRECTION CAT	- 15 GH	CATION CITY OR TOWN AND S	DATE OF DISPOSITION OCTOBER 25, 2011
FUNERAL HOME	D, 7909 STATE (D. BURBAN	K. IL 60459		
FUNERAL DIRECTOR'S NAME DANIEL EDWARD JARKA			FUNERAL DIRECT 031009714	OR'S ILLINOIS LICENSE NUMBER
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH OCTOBER	LOCAL REGISTRAR 25, 2011
CAUSE OF DEATH PART I.	CONGESTIVE HEART FAILURE			1 H 1 H 1 H 1 H 1 H 1 H 1 H 1 H 1 H 1 H
(Final disease or condition resulting in death)		Due to (us as a onsequence of)		DXIMAN DXIMAN ND DEC
				APPRANSET A
c		Due to (or as a consequence of)		20
		Due to (or as a consequence of):		
PART II: Enter other significant condit	ons contributing to death but not resu	Jiting in the undervising cause given	WERI	AN AUTOPSY PERFORMED? NO AUTOPSY FINDINGS USED TO
FEMALE PREGNANCY STATUS			MANI	LETE CAUSE OF DEATH? N/A
NOT APPLICABLE DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY		FURAL INJURY AT WORK?
LOCATION OF INJURY				
DESCRIBE HOW INJURY OCCURRED				IF TRANS-C. (T) TION INJURY, SPECIFY.
				The state of the s
NO I	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DICAL EXAMINER OR ER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 07:11 PM
CERTIFIER PHYSICIAN				DATE CERTIFIED OCTOBER 24, 2011
NAME, ADDRESS AND ZIP CODE OF	PERSON COMPLETING CAUSE OF DE SOUTH ASHLAND AVENUE, O		36	PHYSICIAN'S LICENSE NUMBER 036061662

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.



Cook County Clerk

