# UNOFFICIAL CO

### **DECEASED JOINT** TENANCY AFFIDAVIT

### Prepared by/Mail to:

Shanita Q. T. Straw, Esq. Golden Law 6602 Roosevelt Road Oak Park, Illinois 60304



Doc# 2214019021 Fee \$88.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 05/20/2022 11:30 AM PG: 1 OF 2

Yaw A. Karkam, being duly sworn, being first duly sworn on oath, hereby depose and state as follows:

That Yaw A. Kankam resides at 1339 N. Lorel, Chicago, Illinois 60651.

That Yaw A. Kankam. is 'sust and of Juliana Kankam, deceased, who, at the time of her death, was the owner with Yaw A. Kankam in joint tenancy, of certain real estate located and situated in Cook County, Illinois (the "Troperty"), described as:

LOT 32 IN BLOCK 7 IN AUSTIN PARK SUBDIVISION, BEING A SUBDIVISION IN THE SOUTH ½ OF THE NORTHWEST ¼ OF SECTION 4, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

Property Address: 1339 N. Lorel, Chicago, Illinois 60651

16-04-119-007-0000 Permanent index number:

That Juliana Kankam died on November 1, 2021, as evidenced by a certified copy of the death certificate of the decedent attached hereto.

That Yaw A. Kankam, as the surviving joint tenant, is now the sole owner of the Property, in fee simple.

Further Affiant sayeth not.

Subscribed and sworn to before me by the said Yaw A. Kankam, affiant, this 944 day of May, 2022.

OFFICIAL SEAL SHANITA Q T STRAW NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:01/25/24

Notary Public

# N OF DEATH RECORD

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

STATE FILE NUMBER 2021 0098612

DA.	re:i	SS	UEI

11/12/2021

DECEDENT'S LEGAL NAME JULIANA A KANKAM:		SEX DATE OF DEATH FEMALE NOVEMBER 01, 2021
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY. 73 YEARS	DATE OF BIRTH JUNE 07, 1948
CITY OR TOWN CHICAGO	and the control of th	HER INSTITUTION NAME ERSITY MEDICAL CENTER
PLACE OF DEATH INPATIENT		
BIRTHPLACE SOCIAL SECURIT	TYNUMBER STATUS AT TIME OF DEATH  MARRIED	SURVIVING SPOUSECIVIL UNION PARTNER'S MAIDEN NAME EVER IN U.S. ARMED FORCES? NO
RESIDENCE 1339 NORTH LOFICE A ZENUE	化连续性 经投票 网络拉拉斯 医性神经神经病 网络拉拉斯拉斯斯拉斯斯拉斯斯拉斯斯拉斯斯拉斯斯拉斯斯拉斯斯拉斯斯拉斯斯拉斯斯拉斯斯	TYORTOWN CHICAGO YES
COUNTY STATE ZIP CODE 1	FATHERICO PARENT'S NAME PRIOR TO FIRST MARRI	NGE/CIVIL-UNION MOTHERICO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION AMNIA KRAA
INFORMANT'S NAME. YAW A KANKAM	RELATIONSHIP HUSBAND	MAILING ADDRESS 1339 NORTH-LOREL AVENUE, CHICAGO, IL, 60651
	E OF DISPOSITION  EEM OF HEAVEN CATHOLIC CEMETERY	LOCATION CITY OR TOWN AND STATE DATE OF DISPOSITION NOVEMBER 13, 2021
FUNERAL HOME PETERSON-BASSI CHAPELS, 6938 WE	EST NOF.:H AVENUE CHICAGO, IL.	
FUNERAL DIRECTOR'S NAME JOHN G BASSI		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014204
LOCAL REGISTRAR'S NAME KAREN A YARBROUGH		DATE FILED WITH LOCAL REGISTRAR  NOVEMBER 8, 2021
CAUSE OF DEATH PART I METASTATIC	BREAST CANCER	_ <u> </u>
(Final disease or condition resulting in death), b.	Dise to (6 as a compiler of)	N D D DE
		APPR INTERVA ONSET A
	Dué to (or as a consequence of)	<u> </u>
	Due to lot as a consequence off	
PART II. Enter other significant conditions contribution	g to death but not resulting in the underlying cause	WAS AN AUTOPSY PERFORMED? NO WERE AUTOPSY FINDINGS USED TO
FEMALE PREGNANCY STATUS		COMPLETE CAUSE OF DEATHY N/A  M VN VER OF DEATH
NOT APPLICABLE  DATE OF INJURY	TIME OF INJURY PLACE OF INJURY	NATUPA INJURY;AT WORK?
LOCATION OF INJURY		
DESCRIBE HOW INJURY OCCURRED:		, if transportal on injury, specify:
ATTEND THE DECEASED? DATE LAST SEEN A UNKNOWN	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED TIME OF DEATH 01:04 PM
CERTIFIER PHYSICIAN		DATE CERTIFIED NOVEMBER 05, 2021
NAME, ADDRESS AND ZIP CODE OF PERSON COMPL DOCTOR MARLEN ORTEGA CRUZ, 17		PHYSICIANS LICENSE NUMBER HICAGO, ILLINOIS, 60812 036157380 Q 7064

Order # 355520

CC Copy ID 276447

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.

