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2310029071

Prepared by & Mail to:
Martin Ptasinski
Law Office
8517 S. Archer
Willow Springs, IL 60480

Doc# 2310029071 Fee \$93.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 04/10/2023 04:09 PM PG: 1 OF 2

DECEASED JOINT TENANCY AFFIDAVIT

State of Illinois)
)ss
County of Cook)

Zofia Lizak, hereinafter called Affiant(s) being duly sworn states that she resides at: 7802 W. 82nd St., Bridgeview, Illinois. That Affiant(s) was the spouse of Zdzislaw Lizak, hereinafter referred to as Deceased, and at the time of Decedent's death, was one of the owners of the land in Illinois, described as:

Lot one (1) in Paul R. Weissfuss Bridgeview addition, being a subdivision of the north half (1/2) of the south half (1/2) of the southwest quarter (1/4) of the northwest quarter (1/4) of section 26, township 38 north, range 12, east of the third principal meridian, in Cook County, Illinois.

Permanent Real Estate Index Number: 18-36-110-018-0000

Address of Real Estate: 7801 West 82nd Street, Bridgeview, Illinois 60455

That the Deceased died on March 7, 2017, as evidenced by a copy of Deceased's death certificate attached hereto. That the Deceased, at the time of his death, held his share of the above-mentioned property as a joint tenant and that the Deceased died leaving no last will & testament.

That the total value of the estate of the Deceased, for estate tax purposes, including both real and personal property owned by the Deceased either individually or in joint tenancy at the time of the death of the Deceased, does not exceed the sum of fifty thousand dollars.

Affiant makes this affidavit for the purpose of evidencing that title to the above referenced property hereinafter is owned by Zofia Lizak in fee simple absolute.

Subscribed and sworn before me

This 4 April 2023

Zofia Lizak

Zofia Lizak

Signed and sworn before me on April 4, 2023.

[Signature]

(Notary Public)



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S Y-1
SC
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CERTIFICATION OF DEATH RECORD

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BERWYN HEALTH DISTRICT BERWYN, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2017 0020269

DATE ISSUED 3/14/2017

DECEDENT'S LEGAL NAME ZDZISLAW LIZAK		SEX MALE	DATE OF DEATH MARCH 07, 2017	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 76 YEARS	DATE OF BIRTH AUGUST 16, 1940		
CITY OR TOWN BERWYN		HOSPITAL OR OTHER INSTITUTION NAME MAC NEAL MEMORIAL HOSPITAL		
PLACE OF DEATH INPATIENT				
BIRTHPLACE POLAND	SOCIAL SECURITY NUMBER 322-52-1441	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME ZOFIA GRYGŁAK	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 7801 W 82ND STREET	APT. NO.	CITY OR TOWN BRIDGEVIEW	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60455	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JAN LIZAK	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ZOFIA JACHNA
INFORMANT'S NAME ZOFIA LIZAK		RELATIONSHIP WIFE	MAILING ADDRESS 7801 W 82ND STREET, BRIDGEVIEW, IL, 60455	
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION MAPLE LAKES CREMATORIUM	LOCATION - CITY OR TOWN AND STATE JUSTICE, IL	DATE OF DISPOSITION MARCH 09, 2017
FUNERAL HOME R J MODELL F/H/HOMER GLEN, 12641 W. 143RD ST, HOMER GLEN, IL, 60491				
FUNERAL DIRECTOR'S NAME RICHARD JAMES MODELSKI			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011510	
LOCAL REGISTRAR'S NAME ELIZABETH A PECHOUS			DATE FILED WITH LOCAL REGISTRAR MARCH 9, 2017	
CAUSE OF DEATH PART I: CEREBRAL VASCULAR ACCIDENT				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		Due to (or as a consequence of):		
a		b		
c		Due to (or as a consequence of):		
Due to (or as a consequence of):		Due to (or as a consequence of):		
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? YES	DATE LAST SEEN ALIVE MARCH 07, 2017	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 02:15 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED MARCH 08, 2017	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH SAGUN GAUTAM, 3249 OAK PARK AVENUE, BERWYN, ILLINOIS, 60402			PHYSICIAN'S LICENSE NUMBER 036120619	

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.

Elizabeth A. Pechous
Elizabeth A. Pechous
Registrar



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

THE WORD VOID APPEARS WHEN PHOTOCOPIED

HOLD UP TO LIGHT TO VERIFY TRUE WATERMARK