UNOFFICIAL COPY

STATE OF ILLINOIS)
) SS
COUNTY OF COOK)

NOTICE OF DECEASED TRUSTEE

I, THOMAS F. CATANIA, hereby referred to as the affiant, states under oath that the affiant does hereby give notice of the death of Angela F. Catana, on February 19, 202.: and that at the time of death, the decedent was trustee of the

ANGELA F. CATANIA TRUST

e2407997019x

Doc# 2407907018 Fee \$88.00 ILRHSP FEE:\$18.00 RPRF FEE:\$1.00 KAREN A. YARBROUGH

COOK COUNTY CLERK'S OFFICE DATE: 3/19/2024 10:54 AM

PAGE: 1 OF 3

DATED January 31, 1992, which contains the following property by virtue of a properly recorded deed, deeding into trust said property located in Cook County, Illinois, and legally described as per the attached:

Address of Property: 102 Country Lew., DesPlaines, IL 60016 Property Index Number (P.I.N.): 09-09-201 040-0000 and 09-09-201-049-0000

That the Angela F. Catania Trust Dated January 11, 1990, is in full force and effect, and that Thomas F. Catania is the currently acting Trustee pursuant to the terms of the Trust Agreement;

That all funeral expenses have been paid, and there are no un aid debts of the decedent.

That the decedent had no interest in any business or partnership, nor held any power of appointment at death, nor created any remainder interests in property by transfer with retention of a life interest therein or the creation of interests to take effect in possession or enjoyment after death;

That the decedent died on February 19, 2024, as evidenced by a certifical copy of her death certificate attached hereto, leaving a last will and testament;

That the Illinois Estate Tax and the Federal Estate Tax, if any was due from the decedent's estate has been paid in full.

That the affiant makes this affidavit to induce Attorneys' Title Guaranty Fund, Inc. to i sue its policy of title insurance on the above described property.

The affiant hereby covenants and agrees to forever fully indemnify, protect, defend and hold Attorneys' Title Guaranty Fund, Inc. harmless and to reimburse The Fund for all loss, costs, damages, suits, attorney's fees and expenses of every kind and nature which The Fund may suffer, expend or incur by reason of the issuance of said policy free and clear of the following objections:

- 1. Claims against the estate of Angela F. Catania, the decedent;
- 2. Illinois Estate Inheritance Tax and Federal Estate Tax which may be charged against the estate of said decedent;
- 3. Legacies, if any, created by the will of said decedent;
- 4. Rights of contribution.

Thomas F Catania – as Trustee aforesaid

Subscribed & Sworn to before me this 12th day of March ...

You !

JODI T BEMIS WHITNEY
Official Seal
Notary Public - State of Illinois
My Commission Expires Aug 23, 2026

Affidavit prepared by and return to: Michael J. Cornfield 6153 N. Milwaukee Ave. Chicago, IL 60646 2407907018 Page: 2 of 3

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LEGAL DESCRIPTION

UNIT 102 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 ILLMOIS 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 "C" TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT NUMBER 27402543 TOGETHER IN ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN COOK COUNTY, ILLINOIS.

Address of Property: 102 Country Lane, DesPlaines, IL 60016

Jest J1-040-Colling Colling Co Property Index Number (P.I.N.): 09-69-201-040-0000 and 09-09-201-049-0000

<u>2407907018 Page: 3 of 3</u>

CERTIFICATION OF DEATH RECORD

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2024 0014050	incolors.	CENTIFICATE		DATE ISSUED 2/20/2024
DECEDENT'S LEGAL NAME ANGELA F CATANIA	:		SEX FEMALE	DATE OF DEATH FEBRUARY 19, 2024
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 91 YEARS		DATE OF BIRTH JUNE 23, 1932	
CITY OR TOWN DES PLAINES	· · · · · · · · · · · · · · · · · · ·	HOSPITAL OR OTHER 102 COUNTRY		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE SOCIAL SECTION CHICAGO, IL	-8785 STATUS AT THE	ME OF DEATH S DINEVER IN CIVIL	URVIVING SPOUSE/CIVIL UNION F	ARTHER'S MAIDEN NAME EVER IN U.S. ARMED FORCES? NO
RESIDENCE 102 COUNTRY LANE	APT.		OR TOWN S PLAINES	INSIDE CITY LIMITS? YES
COOK STATE ZIP CODE	FATHER/CO-PARENTS HAME ANDREW CATANI			RENTS NAME PAIOR TO FIRST MARRIAGE/CIVIL UNION S BIANCO
INFORMANT'S NAME THOMAS F CATANIA	RELATIONSHIP BROTHER			VE, CHICAGO, IL, 60630
	LACE OF DISPOSITION QUESTION OF HEAVEN CATHOLIC	t e	OCATION - CITY OR TOWN A HILLSIDE; IL	ND STATE DATE OF DISPOSITION. FEBRUARY 21, 2024
FUNERAL HOME RYAN-PARKE FUNERAL HOME, 120	S. NOPTHWEST HWY,	PARK RIDGE, IL, 6	60068	
FUNERAL DIRECTOR'S NAME EDWARD J ELLIS			034014	RECTOR'S ILLINOIS LICENSE NUMBER 790
LOCAL REGISTRAR'S NAME KAREN A YARBROUGH	Ċ,			WITH LOCAL REGISTRAR ARY 20, 2024
CAUSE OF DEATH PART I. ALZHEIME IMMEDIATE CAUSE a. (Final disease or condition	RS DEMENTIA	(or as a r Assequence of):		MATE ETWEEN DEAT-
resulting in death) b.		0,		APPROX ERVAL B SET AND
c .	Due to	(or as a consequence of	2/1	<u> </u>
land the state of the state of	Due to	(or as a consequence of):		
PART II. Enter other significant conditions contrib	uting to death but not resulting in	n the underlying cause give		WAS AN AUTOPSY PERFORMED? NO
	: : : : : : : : : : : : : : : : : : :	<u> </u>	4/	WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A
FEMALE PREGNANCY STATUS NOT APPLICABLE		: 		MATURAL
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY		INJURY AT WORK?
LOCATION OF INJURY				
DESCRIBE HOW INJURY OCCURRED:				IF TRAN SPOLITATION INJURY, SPECIFY:
ATTEND THE DECEASED? DATE LAST SEE NO UNKNOW		L EXAMINER OR ONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 02:35 AM
CERTIFIER PHYSICIAN				DATE CERTIFIED FEBRUARY 19, 2024

2739721

PHYSICIAN'S LICENSE NUMBER

036108503



NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH

STEVEN KANTER, 800 W BIESTERFIELD ROAD, ELK GROVE VILLAGE, ILLINOIS, 60007

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.



