

# UNOFFICIAL COPY

FORM 3703

*Bernice Nardiglio*  
(affiant's signature)

*Notary Public*  
*Mr. J. J. ...*  
this 27 day of December, A.D. 1991

**OFFICIAL SEAL**  
Michael J. Garvey  
Notary Public, State of Illinois  
My Commission Expires 9-13-95

Bernice Nardiglio

Subscribed and sworn to before me by the said

Affiant makes this affidavit for that purpose of inducing the Chicago Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

That the total value of the estate of the deceased, 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 \$10,000 dollars.

Leaving a Last Will & Testament which was filed in the Unproved Will Box of the Probate Division of the Circuit Court of Cook County, Illinois about

Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproved will should be filed with the Clerk of the Probate Division of the Circuit Court of Cook County, Illinois.

Leaving no Last Will & Testament.

That the deceased died:

certified copy of death certificate of the deceased attached hereto.

That the deceased died March 9, 1983, as evidenced by a

DEPT-01 RECORDINGS  
148888 TRAN 1991/11/92 12:41:00  
46561 \* IF \* -92-086788  
COOK COUNTY RECORDER

The North 3 feet of Lot 44 and all of Lot 45 in Block 4 in Edward W. Noonan's West Chicago Avenue Addition, being a subdivision of Blocks 1, 2, 3 and 4 in Blanchard Brother's subdivision of the South 1/2 of the South West 1/4 of the South East 1/4 of section 3, Township 39 North, Range 13 East of the Third Principal Meridian, in Cook County, Illinois.

deceased who, at the time of his death, was one of the owners of the land in Cook County, Illinois, described as:

That she was acquainted with JOSEPH WLOCH

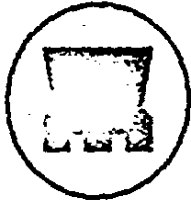
states that she resides at 851 North Kostner in the City of Chicago

BERNICE NARDIGLIO being duly sworn

STATE OF ILLINOIS DU PAGE } ss. Order No. 92086788

DECEASED JOINT TENANCY AFFIDAVIT

CHICAGO TITLE INSURANCE COMPANY



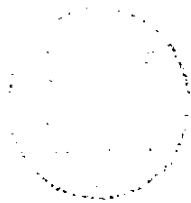
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Property of Cook County Clerk's Office

05/15/18



CLERK OF COOK COUNTY

32086788

STATE OF ILLINOIS

MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO 1624  
REGISTERED NUMBER 1961

DECEASED NAME: JOSEPH M. COOK  
 COUNTY OF DEATH: COOK  
 DATE OF DEATH: MARCH 9, 1989  
 SEX: MALE  
 AGE: 75  
 MARRIAGE STATUS: NEVER MARRIED  
 OCCUPATION: None  
 SOCIAL SECURITY NUMBER: 1740-10-6877  
 CITY, TOWN, VILLAGE OR ROAD AND DISTRICT: CHICAGO  
 RESIDENCE: 851 NO. KOSTNER ST. CHICAGO, ILLINOIS 60651  
 FATHER'S NAME: Walter Wlach  
 MOTHER'S NAME: Frances Okonek  
 RELATIONSHIP: HOSPITAL RECORDS  
 PLACE OF BIRTH: CHICAGO, ILLINOIS  
 RACE: WHITE  
 ETHNIC ORIGIN: POLISH  
 USUAL PLACE OF BIRTH: CHICAGO, ILLINOIS  
 USUAL PLACE OF DEATH: CHICAGO, ILLINOIS  
 PLACE OF DEATH: WEST-SUBURBAN HOSPITAL-MEDICAL CENTER  
 DATE OF DEATH: MARCH 9, 1989  
 TIME OF DEATH: 9:45 P.M.  
 CAUSE OF DEATH: ACUTE MYOCARDIAL INFARCTION OF MISC. CAUSE  
 IMMEDIATE CAUSE: ACUTE MYOCARDIAL INFARCTION OF MISC. CAUSE  
 CONDITIONS: CORONARY ARTERY DYSMIA  
 IMMEDIATE CAUSE: ACUTE MYOCARDIAL INFARCTION OF MISC. CAUSE  
 UNDERLYING CAUSE: ATHEROSCLEROTIC VASCULAR DYSMIA

209. DATE OF OPERATION: NONE  
 210. DID THE DECEASED UNDERGO ANY MAJOR SURGICAL OPERATION? YES  
 211. WAS SURGICAL EXAMINATION PERFORMED? YES  
 212. TO THE BEST OF MY KNOWLEDGE, DATE AND PLACE AND TIME TO THE CAUSE(S) STATED: 9:45 P.M. MARCH 10, 1989  
 220. SIGNATURE: [Signature] 320.60302  
 221. NAME AND ADDRESS OF CLINIC: KROGER MIN 715 N LAKE CHICAGO, ILLINOIS 60639  
 222. NAME OF ATTENDING PHYSICIAN OR OTHER DIAGNOSER: [Signature]  
 23. BIRTHAL INFORMATION: St. Adalbert  
 24a. BIRTHAL INFORMATION: St. Adalbert  
 24b. BIRTHAL INFORMATION: St. Adalbert  
 25a. FUNERAL HOME: Rago Brothers Funeral Home 5120 W. Fullerton Chicago, IL 60639  
 25b. FUNERAL HOME: Rago Brothers Funeral Home 5120 W. Fullerton Chicago, IL 60639  
 26a. DATE OF BURIAL: MAR 10 1989  
 26b. PLACE OF BURIAL: 7481

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named on this J and that this record was established and filed in my office in accordance with the provisions of the Illinois statutes relating to the registration of births, marriages and deaths.

DATE: MAR 14 1989  
 SIGNED: [Signature]  
 OFFICIAL TITLE - LOCAL REGISTRAR

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Property of Cook County Clerk's Office