

UNOFFICIAL COPY

93831658



# Chicago Title Insurance Company

## DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS  
COUNTY OF

Order No. 15-04-111-032-0000

MARY SCARLATO being duly sworn  
states that she resides at 1728 N. 37th AVENUE in the City of  
Stone Park, ILL 60165

That he was acquainted with \_\_\_\_\_  
deceased who, at the time of \_\_\_\_\_ death, was one of the owners of the land in COOK  
County, Illinois, described as:

PIN 15-04-111-032-0000

DEPT-01 RECORDING \$23.00  
T#8889 TRAN 5232 10/15/93 16:02:00  
#0507 # \*-93-831658  
COOK COUNTY RECORDER

That the deceased died ANTONIO SCARLATO, as evidenced by a  
certified copy of death certificate of the deceased attached hereto.

That the deceased died:

- Leaving no Last Will & Testament.
- Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven will should be filed with the Clerk of the Probate Division of the Circuit Court of \_\_\_\_\_ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of \_\_\_\_\_ County, Illinois about \_\_\_\_\_

X 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 \_\_\_\_\_ dollars.

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.

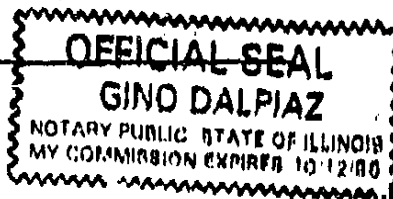
Subscribed and sworn to before me by the said

93831658

MARY SCARLATO

this 28th day of SEPTEMBER, A.D. 19 93

Gino Dalpiaz  
Notary Public



Mary Scarlato  
(affiant's signature)

2300

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Property of Cook County Clerk's Office

REGISTRATION NO. 16,35  
 DISTRICT NO. 636  
 REGISTERED NUMBER 636  
 STATE OF ILLINOIS  
 MEDICAL CERTIFICATE OF DEATH  
 STATE FILE NUMBER 93831655

DECEASED—NAME Antonio Scarlato SEX Male DATE OF BIRTH April 30, 1918 COUNTY OF DEATH Cook

1. RACE—WHITE OR DESCENT ITALIAN 2. SEX Male 3. DATE OF BIRTH April 30, 1918 4. COUNTY OF DEATH Cook

5. CITY, TOWN, VILLAGE OR BLDG DISTRICT White 6. HOSPITAL OR OTHER INSTITUTION—NAME AND ADDRESS Westlake Community Hospital 7. DATE OF DEATH October 16, 1985 8. COUNTY OF DEATH Cook

9. CITY, TOWN, VILLAGE OR BLDG DISTRICT Melrose Park 10. HOSPITAL OR OTHER INSTITUTION—NAME AND ADDRESS Westlake Community Hospital 11. DATE OF DEATH October 16, 1985 12. COUNTY OF DEATH Cook

13. NAME OF SURVIVING SPOUSE (If none, name of wife) MARY MARI

14. NAME OF SURVIVING SPOUSE (If none, name of wife) MARY MARI

15. FATHER—NAME Luigi SCARLATO 16. MOTHER—MARRIAGE NAME Carolina Capizzano

17. DEATH WAS CAUSED BY 2nd stage of metastatic carcinoma of the lungs

18. DEATH WAS CAUSED BY 2nd stage of metastatic carcinoma of the lungs

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53. DEATH WAS CAUSED BY 2nd stage of metastatic carcinoma of the lungs

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named at item 1, and that the record was established and filed in my office in accordance with the provisions of the Illinois Vital Records Act.

DATE May 13, 1993 SIGNED Joseph J. Trucco

AT MELROSE PARK ILLINOIS OFFICIAL TITLE DEPUTY REGISTRAR

The original record of this death is permanently filed with the ILLINOIS DEPARTMENT OF PUBLIC HEALTH at Springfield. County clerks and local registrars are authorized to make certifications from copies of the original record. The Illinois statutes provide that the certification of a death record by the Department of Public Health, local registrar or county clerk shall be prima facie evidence in all courts and places of the facts therein stated.

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