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Chicago Title Insurance Company

94169992

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF COOK

ss.

Order No.

94169992

LAWRENCE GULOTTA

being duly sworn

states that he resides at 663 Bensley in the City of Calumet City, Illinois.

That he was acquainted with ELIZABETH J. GULOTTA deceased who, at the time of her death, was one of the owners of the land in Cook County, Illinois, described as:

Lots 30 and 31 in Block 3 in Emil G. Skoglunds Calumet Manor in the East Half of Section 12, Township 36 North, Range 14 East of the Third Principal Meridian, in Cook County, Illinois.

PIN 29-12-429-046-0000

ADDRESS: 663 Bensley Calumet City, Ill.

RECORDING
146666 FROM 45.6 02/22/94 12:23:00
16692 + 100 0-94-169992
COOK COUNTY RECORDER

That the deceased died October 25, 1993, 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 _____

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

LAWRENCE GULOTTA

OFFICIAL SEAL

KAREN R. JOCHA

this 8th day of February 1994

My Commission Expires Jan. 7, 1996

Notary Public

Lawrence Gulotta
(affiant's signature)

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Property of Cook County Clerk's Office

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MEDICAL CERTIFICATE OF DEATH

STAYC FIVE
MAY 11

STATE OF ILLINOIS									
MEDICAL CERTIFICATE OF DEATH									
REGISTRATION INSTRUMENT NO. 16.0		REGISTERED NUMBER 5		DECEASED NAME ELIZABETH J. GUILLOT		SEX FEMALE		DATE OF DEATH 3 OCTOBER 25, 1993	
CITY OF DEATH CHICAGO		AGE - LAST BIRTHDAY 54 70		UNDERLYING CAUSE SC		DATE OF BIRTH 54 OCTOBER 22, 1923		DATE OF DEATH 3 OCTOBER 25, 1993	
CITY TOWN TWP OR ROAD DISTRICT		CITY TOWN TWP OR ROAD DISTRICT		CITY TOWN TWP OR ROAD DISTRICT		CITY TOWN TWP OR ROAD DISTRICT		CITY TOWN TWP OR ROAD DISTRICT	
6A CALUMET CITY		6B 663 BENSLEY		6C 663 BENSLEY		6D 663 BENSLEY		6E 663 BENSLEY	
7 CALUMET CITY, IL		8A MARRIED		8B LAWRENCE GUILLOT		8C 11		8D 11	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION		KIND OF BUSINESS OR INDUSTRY		EDUCATION (SPECIAL)		EDUCATION (GENERAL)	
10 228-18-8118		11A HOMEMAKER		11B OWN HOME		11C 11		11D 11	
RESIDENCE (STREET AND NUMBER)		RACE (WHITE, BLACK, AMERICAN INDIAN, OR OTHER SPECIFY)		CITY, TOWN, TWP, OR ROAD DISTRICT NO		INSIDE CITY (YES/NO)		COUNTY	
13A ILLINOIS		13B WHITE		13C CALUMET CITY		13D 11		13E COOK	
FATHER NAME FIRST MIDDLE LAST		MOTHER NAME FIRST MIDDLE LAST		MOTHER NAME FIRST MIDDLE LAST		MOTHER NAME FIRST MIDDLE LAST		MOTHER NAME FIRST MIDDLE LAST	
15 LAWRENCE		16 VINCE		17A HUSBAND		17B 17C		17D 17E	
DECEASED NAME (TYPE OR PRINT)		RELATIONSHIP		MAILING ADDRESS (STREET AND NO. OR R.F.D. CITY, TOWN, STATE, ZIP)		CITY, TOWN, STATE, ZIP		CITY, TOWN, STATE, ZIP	
17A LAWRENCE GUILLOT		17B HUSBAND		17C 17D		17E 17F		17G 17H	
18 PART I		19A 19B		19C 19D		19E 19F		19G 19H	
Immediate Cause (Final cause or condition resulting in death)		Lung Cancer		DUE TO OR AS A CONSEQUENCE OF		DUE TO OR AS A CONSEQUENCE OF		DUE TO OR AS A CONSEQUENCE OF	
CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (B) STATE THE UNDERLYING CAUSE LAST		Lung Cancer		DUE TO OR AS A CONSEQUENCE OF		DUE TO OR AS A CONSEQUENCE OF		DUE TO OR AS A CONSEQUENCE OF	
PART II		Other significant conditions contributing to death but not resulting in the underlying cause (C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z)		Other significant conditions contributing to death but not resulting in the underlying cause (C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z)		Other significant conditions contributing to death but not resulting in the underlying cause (C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z)		Other significant conditions contributing to death but not resulting in the underlying cause (C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z)	
DATE OF OPERATION, IF ANY		MAJOR FINDINGS OF OPERATION		AUTOPSY (YES/NO)		NO		19G DNA	
20A 20B		20C 20D		20E 20F		20G 20H		20I 20J	
HOSPITAL NOTIFIED (YES/NO)		MONTH DAY YEAR		WAS CORPSE FOR MEDICAL EXAMINATION NOTIFIED (YES/NO)		21B NO		21C 21D	
21A 21B		21C 21D		21E 21F		21G 21H		21I 21J	
TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED		SIGNATURE		DATE		22A 22B		22C 22D	
22A 22B		22C 22D		22E 22F		22G 22H		22I 22J	
22C 22D		22E 22F		22G 22H		22I 22J		22K 22L	
22E 22F		22G 22H		22I 22J		22K 22L		22M 22N	
22G 22H		22I 22J		22K 22L		22M 22N		22O 22P	
22I 22J		22K 22L		22M 22N		22O 22P		22Q 22R	
22K 22L		22M 22N		22O 22P		22Q 22R		22S 22T	
22M 22N		22O 22P		22Q 22R		22S 22T		22U 22V	
22O 22P		22Q 22R		22S 22T		22U 22V		22W 22X	
22Q 22R		22S 22T		22U 22V		22W 22X		22Y 22Z	
22S 22T		22U 22V		22W 22X		22Y 22Z		22AA 22AB	
22U 22V		22W 22X		22Y 22Z		22AA 22AB		22AC 22AD	
22W 22X		22Y 22Z		22AA 22AB		22AC 22AD		22AE 22AF	
22Y 22Z		22AA 22AB		22AC 22AD		22AE 22AF		22AG 22AH	
22AA 22AB		22AC 22AD		22AE 22AF		22AG 22AH		22AI 22AJ	
22AC 22AD		22AE 22AF		22AG 22AH		22AI 22AJ		22AK 22AL	
22AE 22AF		22AG 22AH		22AI 22AJ		22AK 22AL		22AM 22AN	
22AG 22AH		22AI 22AJ		22AK 22AL		22AM 22AN		22AO 22AP	
22AI 22AJ		22AK 22AL		22AM 22AN		22AO 22AP		22AQ 22AR	
22AK 22AL		22AM 22AN		22AO 22AP		22AQ 22AR		22AS 22AT	
22AM 22AN		22AO 22AP		22AQ 22AR		22AS 22AT		22AU 22AV</	

October 27, 1993

1010 Lake, St., Oak Park, IL. 60301

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