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1999-06-02 11:41:39
Cook County Recorder 27.50



99528318

JOINT TENANCY AFFIDAVIT

State of Illinois)
) SS.
County of Cook)

JOSEPHINE RUSSO,

hereby referred to as

the affiant, states under

oath that the affiant resides at 4244 Mobile ,

in the City of Chicago, Illinois; that the affiant was

acquainted with **Samuel A. Izzo**, the decedent; that at the time of death, the decedent was one of the owners of the property, by virtue of a properly recorded joint tenancy warranty deed, said property, located in Cook County, Illinois, and legally described as follows:

SEE ATTACHED EXHIBIT "A"

P.N.T.N.

4

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 May 19, 1980, leaving no last will and testament;

That the total value of decedent's estate, including the taxable interest in the above property was \$ 25,000, and that the value of the above property individually was \$ 25,000.

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

The affiant hereby covenants and agrees that:

1. Claims against the Estate of Samuel A. Izzo, the decedent.
2. Illinois State 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.

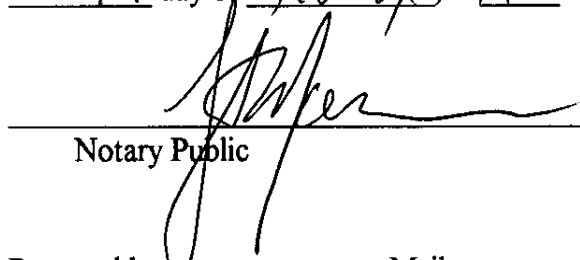
Josephine Russo (SEAL)

_____ (SEAL)

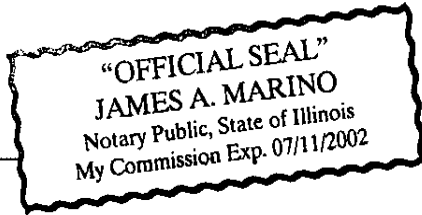
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Subscribed and sworn to before me this
4th day of February, 1999.



Notary Public



Prepared by:
James A. Marino
5521 N. Cumberland
Suite 1109
Chicago, Illinois 60656

Mail to:
James A. Marino
5521 N. Cumberland
Suite 1109
Chicago, Illinois 60656



PIN# 13-17-301-085

Common Address: 4244 N. Mobile, Chicago, Illinois 60634

Note: If the decedent left a will, it will be necessary that the original or certified copy thereof be presented to us for inspection. A death certificate, together with evidence of payment of death taxes, if any, should accompany this affidavit.

Property of Cook County Clerk's Office

MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 16.10

REGISTERED NUMBER

DECEASED - NAME: Samuel I. Izzo, Male, DATE OF DEATH: 3 May 19, 1980

1. DECEASED - NAME: Samuel I. Izzo, Male, DATE OF DEATH: 3 May 19, 1980

2. PLACE OF BIRTH: Chicago, Illinois, DATE OF BIRTH: 6 Sept 15, 1903, COUNTY OF DEATH: Cook

3. RACE: White, ETHNIC ORIGIN: Italian, HOSPITAL OR OTHER INSTITUTION: Northwest Hospital

4. RACE: White, ETHNIC ORIGIN: Italian, HOSPITAL OR OTHER INSTITUTION: Northwest Hospital

5. AGE: 76, SEX: Male, DATE OF BIRTH: 6 Sept 15, 1903, COUNTY OF DEATH: Cook

6. SEX: Male, DATE OF BIRTH: 6 Sept 15, 1903, COUNTY OF DEATH: Cook

7. PLACE OF BIRTH: Chicago, Illinois, HOSPITAL OR OTHER INSTITUTION: Northwest Hospital

8. PLACE OF BIRTH: Chicago, Illinois, HOSPITAL OR OTHER INSTITUTION: Northwest Hospital

9. CITIZENSHIP: USA, MARRIAGE STATUS: Married, NAME OF SURVIVING SPOUSE: Louise Falbo

10. MARRIAGE STATUS: Married, NAME OF SURVIVING SPOUSE: Louise Falbo

11. MARRIAGE STATUS: Married, NAME OF SURVIVING SPOUSE: Louise Falbo

12. SOCIAL SECURITY NUMBER: 338-09-9883, OCCUPATION: Car Cleaner, WAR OR DATES OF SERVICE: None

13. OCCUPATION: Car Cleaner, WAR OR DATES OF SERVICE: None

14. RESIDENCE: 4244 N. Mobile, Chicago, Illinois, COUNTY: Cook

15. FATHER: Joseph Izzo, MOTHER: Christine Mocha

16. RELATIONSHIP: Medical Records, MAILING ADDRESS: 5645 W. Addison Chgo, IL 60634

17. RELATIONSHIP: Medical Records, MAILING ADDRESS: 5645 W. Addison Chgo, IL 60634

18. DEATH CAUSED BY: (a) Arteriosclerotic Heart Disease, (b) Due to or as a consequence of, (c) Due to or as a consequence of

19. DEATH CAUSED BY: (a) Arteriosclerotic Heart Disease, (b) Due to or as a consequence of, (c) Due to or as a consequence of

20. MAJOR FINDINGS OF OPERATION: Pylonephritis with Ureteral Calculi, Bilateral

21. MAJOR FINDINGS OF OPERATION: Pylonephritis with Ureteral Calculi, Bilateral

22. SIGNATURE: Anthony J. Izzo, DATE SIGNED: 21 May 19, 1980, HOUR OF DEATH: 3:35 A.M.

23. NAME AND ADDRESS OF CERTIFIER: Dr. Anthony LaPorta, 4920 N. Central Chicago, Illinois 60630

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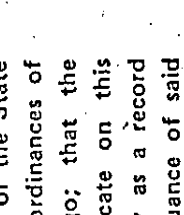
100. NAME AND ADDRESS OF CERTIFIER: Dr. Anthony LaPorta, 4920 N. Central Chicago, Illinois 60630

STATE OF ILLINOIS }
 COUNTY OF COOK } SS
 CITY OF CHICAGO }

I, Hugo H. Muriel, M.D. Local Registrar of Vital Statistics of the City of Chicago, do hereby certify that I am the keeper of the records of births, stillbirths and deaths of the City of Chicago by virtue of the laws of the State of Illinois and the ordinances of the City of Chicago; that the accompanying certificate on this sheet is a true copy as a record kept by me in pursuance of said laws and ordinances.

LOCAL REGISTRAR
 HUGO H. MURIEL, M.D.
 CHICAGO, ILLINOIS

This Certified Copy VALID
 When MULTICOLOR SEAL
 And BLUE SIGNATURE Are
 Affixed.



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STATE OF ILLINOIS
 COUNTY OF COOK
 CITY OF CHICAGO

CHICAGO DEPT. OF HEALTH
 RICHARD J. DALEY CENTER, ROOM 1111
 CONGRESS LEVEL - CHICAGO 60605

DATE RECD BY LOCAL REGISTRAR (MONTH, DAY, YEAR)
 MAY 20 1980

ILLINOIS DEPARTMENT OF PUBLIC HEALTH - Office of Vital Records
 (BASED ON 1978 U.S. STANDARD CERTIFICATE)

UNOFFICIAL COPY 99528318

LEGAL DESCRIPTION

THE SOUTH 40 FEET OF THE NORTH 88 FEET OF THE EAST 133.3 FEET OF LOT 43 IN FREDERICK H. BARTLETT'S SUBDIVISION OF THE NORTH SEVEN EIGHTHS OF THE WEST HALF OF THE SOUTH WEST QUARTER OF SECTION 17, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN# 13-17-301-085
Property of Cook County Clerk's Office