

REGISTRATION DISTRICT NO. **160**
 REGISTERED NUMBER

DECEASED NAME **SALVATORE MESSINA** SEX **MALE** DATE OF DEATH **MARCH 2, 1968**
 RACE **WHITE** AGE **69** UNDER 1 YEAR **NO** UNDER 1 DAY **NO** PLACE OF DEATH **COOK COUNTY**
 CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER **LEYDEN TOWNSHIP** MONTH, DAY, YEAR **JAN. 1, 1899**
 HOSPITAL OR OTHER INSTITUTION NAME **GOTTLEB MEMORIAL HOSPITAL** IF NOT IN EITHER, GIVE STREET AND NUMBER

BIRTHPLACE STATE OR FOREIGN **ITALY** CITIZEN OF WHAT COUNTRY **U.S.A.** NAME OF SURVIVING SPOUSE **LEONARDA TORRETTA**
 SOCIAL SECURITY NUMBER **319-09-3613** USUAL OCCUPATION **RETIRED PRESSER** KIND OF BUSINESS OR INDUSTRY **MARRIED** IF WIFE, GIVE MAIDEN NAME
 RESIDENCE **ILLINOIS** COUNTY **COOK** CITY **RIVER GROVE** STREET AND NUMBER **2312 WEST STREET**
 CITY, TOWN, TWP. OR ROAD DISTRICT NO. **LEYDEN TOWNSHIP** COUNTY **COOK** CITY **RIVER GROVE** STREET AND NUMBER **2312 WEST STREET**

FATHER NAME **SANTO** MOTHER MAIDEN NAME **ROSE**
 FATHER NAME **SANTO** MOTHER MAIDEN NAME **ROSE**
 PART I. DEATH WAS CAUSED BY: **ACUTE MYOCARDIAL INFARCTION, ANTERO-SEPTAL WALL**
 IMMEDIATE CAUSE **ACUTE MYOCARDIAL INFARCTION, ANTERO-SEPTAL WALL**
 (a) **OF LEFT VENTRICLE**
 (b) **ATHEROSCLEROSIS OF THE CORONARY ARTERIES WITH**
 (c) **OCCLUSION OF LEFT ANT. DESCENDING BRANCH, ASHD.**

CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE OF DEATH, AND CAUSE OF DEATH, IF NOT CAUSE LAST: **28 yrs**
 PART II. OTHER SIGNIFICANT CONDITIONS, CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I. **5 yrs**

DATE OF OPERATION, IF ANY, MAJOR FINDINGS OF OPERATION: **4/28/68**
 200. **4/28/68**
 201. **4/28/68**
 202. **4/28/68**
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 217. **4/28/68**
 218. **4/28/68**
 219. **4/28/68**
 220. **4/28/68**

1. CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THIS DEATH OCCURRED AT **2:45 P.M.** ON THE DATE, AT THE PLACE AND FROM THE CAUSE(S) STATED
 2. I ATTENDED THE DECEASED FROM: **27** MONTH **1968** YEAR **27** DAY **68** MONTH **3** DAY **68** YEAR

SIGNATURE **John B. Hall, M.D.** DATE SIGNED **3/4/68** MONTH, DAY, YEAR
 MAILING ADDRESS - CERTIFIER **226 S. W. 11th St. Chicago, Ill.** CITY OR TOWN **CHICAGO** STATE **ILLINOIS** ZIP **60608**

223. BUREAU OF HEALTH, ILLINOIS DEPARTMENT OF PUBLIC HEALTH, CHICAGO, ILL. 60608
 224. FUNERAL HOME **MORRISZOO FUNERAL HOME 3302 W. HARRISON ST. CHICAGO, ILL.**
 225. FUNERAL DIRECTOR'S SIGNATURE **John B. Hall, M.D.** FUNERAL DIRECTOR'S LICENSE NUMBER **0047**

226. LOCAL REGISTRAR'S SIGNATURE **John B. Hall, M.D.** DATE RECD. BY LOCAL REGISTRAR **3/4/68**
 227. LOCAL REGISTRAR'S SIGNATURE **John B. Hall, M.D.** DATE RECD. BY LOCAL REGISTRAR **3/4/68**
 228. LOCAL REGISTRAR'S SIGNATURE **John B. Hall, M.D.** DATE RECD. BY LOCAL REGISTRAR **3/4/68**
 229. LOCAL REGISTRAR'S SIGNATURE **John B. Hall, M.D.** DATE RECD. BY LOCAL REGISTRAR **3/4/68**
 230. LOCAL REGISTRAR'S SIGNATURE **John B. Hall, M.D.** DATE RECD. BY LOCAL REGISTRAR **3/4/68**
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 239. LOCAL REGISTRAR'S SIGNATURE **John B. Hall, M.D.** DATE RECD. BY LOCAL REGISTRAR **3/4/68**
 240. LOCAL REGISTRAR'S SIGNATURE **John B. Hall, M.D.** DATE RECD. BY LOCAL REGISTRAR **3/4/68**

I HEREBY CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT COPY OF THE DEATH RECORD FOR THE DECEASED NAMED IN ITEM 1 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 FETAL DEATHS AND DEATHS.
 Date **MAR 6 1968** SIGN ID
 At COOK COUNTY DEPARTMENT OF PUBLIC HEALTH, CHICAGO, ILLINOIS REGISTERAR
 1125 South Racine Avenue, Chicago, Illinois 60608
UNOFFICIAL COPY

UNOFFICIAL COPY

Property of Cook County Clerk's Office



STATE OF ILLINOIS

COUNTY OF _____

[Signature]
DuPage

SS.

3612269

JOINT TENANCY AFFIDAVIT

Leonarda Messina a/k/a Nettie Messina, hereinafter referred to as the affiant, states under oath that the affiant resides at 3 N 412 Patricia Lane in the City of Elmhurst, Illinois; that the affiant was acquainted with Salvatore Messina, 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:

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 March 2, 1968, leaving no/a last will and testament;

That the total value of decedent's estate, including the taxable interest in the above property was \$ 20,000.00,

and that the value of the above property individually was \$ 20,000.00.

That the Illinois Inheritance 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 the Registrar of Titles to issue its policy of title insurance on the above described property.

The affiant hereby covenants and agrees, for himself/herself/themselves, heirs, personal representatives or assignees, to forever fully indemnify, protect, defend and hold the Registrar of Titles harmless and to reimburse the Fund for all loss, costs, damages, suits, attorney's fees and expenses of every kind and nature which the Registrar 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 Salvatore Messina, 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 to contribution.

Leonarda Messina
Nettie Messina (Seal)
Leonarda Messina a/k/a Nettie Messina (Seal)

Subscribed and Sworn to before me

this 22nd day of April, 1987.

[Signature]

Notary Public

*Prepared by
G De Bruff
29 S La Salle
Chicago*

Note: If the decedent left a will, it will be necessary that the original or a 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.

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UNOFFICIAL COPY

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Handwritten notes: 1/10/83, 3612269, 15

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REC'D APR 30 11:14:37
HARRY (JUS) GERRIT
RECORDS & ADMINISTRATION

3612269

ATTORNEYS TITLE GUARANTY FUND, INC.
23 So. LaSalle St., Suite 519
Chicago, Illinois 60603

IDENTIFIED NO.	REASSUE OF FORMS THIS HARRY BUS VESPELL SANCHEZ
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Property of Cook County Clerk's Office

Lot Nineteen.....(19)

in Block Two (2) in N. O. Shively and Company's Fullerton Avenue Park Addition, being a Subdivision (except for the Railroad Right of Way) South of the Indian Boundary Line, the East 20 acres of the Northwest Fractional Quarter (1/4) of the Northeast Fractional Quarter (1/4) of Section 34, Town 40 North, Range 12, East of the Third Principal Meridian.

ABO-12.34-203-051 A

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