

PERMANENT CERTIFICATE
 TEMPORARY CERTIFICATE
 DECEASED'S BIRTH NO. _____

Form, or Print in PERMANENT INK. See A Manual for Coroners and Funeral Directors. Attachments for INSTRUCTIONS.

CORONER'S CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. **101**
 REGISTERED NUMBER **1641**
 STATE OF ILLINOIS STATE FILE NUMBER _____

DECEASED - NAME **Edward C. Kwiatkowski** FIRST MIDDLE LAST
 SEX **2. Male** DATE OF DEATH **3. October 24, 1981**

RACE **4. White** AMERICAN ORIGIN OR DESCENT **5a. 67** UNDER 1 DAY UNDER 1 YEAR UNDER 5 YEARS UNDER 10 YEARS UNDER 15 YEARS UNDER 20 YEARS UNDER 25 YEARS UNDER 30 YEARS UNDER 35 YEARS UNDER 40 YEARS UNDER 45 YEARS UNDER 50 YEARS UNDER 55 YEARS UNDER 60 YEARS UNDER 65 YEARS UNDER 70 YEARS UNDER 75 YEARS UNDER 80 YEARS UNDER 85 YEARS UNDER 90 YEARS UNDER 95 YEARS UNDER 100 YEARS
 CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER **Rockford** HOSPITAL OR OTHER INSTITUTION - NAME (IF NOT IN WITNESS, GIVE STREET AND NUMBER) **7c. Swedish American Hospital**

CITIZEN OF WHAT COUNTRY **9. U.S.A.** MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (PRECISE)
 SOCIAL SECURITY NUMBER **12. 339-07-7001** USUAL OCCUPATION **13a. Postman** KIND OF BUSINESS OR INDUSTRY **11. Evelyn Szymanski** U.S. WAR VETERAN (YES OR NO) (DATE OF SERVICE)
 RESIDENCE STREET AND NUMBER **14a. 8817 S. Crandon Av.** CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER **13b. Chicago** INSIDE CITY (YES/NO) **13c. no** COUNTY **14d. Cook** STATE **14e. Illinois**

FATHER - NAME **Thomas Kwiatkowski** FIRST MIDDLE LAST MOTHER - MAIDEN NAME **COCK** COUNTY **14e. Illinois** STATE **14e. Illinois**

INFORMANT'S SIGNATURE **Bennie Beckwith** RELATIONSHIP **Coroner's Records** MAILING ADDRESS **17e. 420 West State St., Rockford, IL 61103**

17a. **Bennie Beckwith**
 18. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE (A), (B), AND (C))
 IMMEDIATE CAUSE
 (a) **Probable Myocardial infarction**
 (b) **Arteriosclerotic heart disease**
 (c) _____
 CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE IN STANDING THE ORDER: LIST CAUSE LAST.

PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH (IF ANY RELATED TO CAUSE GIVEN IN PART I)
 ACCIDENT, SUICIDE, HOMICIDE OR UNDETERMINED (PRECISE)
 DATE OF INJURY (MONTH, DAY, YEAR) (M/A)
 HOW INJURY OCCURRED (ENTER NATURE OF INJURY MENTIONED IN PART I FOR PART II, ITEM IN)
 PLACE OF INJURY AT HOME, WORK, FACTORY, OFFICE BUILDING, ETC. (M/A)
 LOCATION (CITY, TWP. OR TOWN, OR TWP. OR RD. DIST. NO. COUNTY, STATE)
 INJURY AT WORK (YES, NO)
 INJURY AT HOME (YES, NO)
 INJURY AT FACTORY, OFFICE BUILDING, ETC. (M/A)
 LOCATION (CITY, TWP. OR TOWN, OR TWP. OR RD. DIST. NO. COUNTY, STATE)
 20a. _____
 20b. _____
 20c. _____
 20d. _____
 20e. _____
 20f. _____
 20g. _____
 20h. _____
 20i. _____
 20j. _____
 20k. _____
 20l. _____
 20m. _____
 20n. _____
 20o. _____
 20p. _____
 20q. _____
 20r. _____
 20s. _____
 20t. _____
 20u. _____
 20v. _____
 20w. _____
 20x. _____
 20y. _____
 20z. _____

21. I CERTIFY THAT IN MY OPINION BASED UPON MY INVESTIGATION AND/OR THE INFORMATION THE DEATH OCCURRED ON THE DATE, AT THE PLACE AND DUE TO THE CAUSE(S) STATED, AND THAT _____
 CORONER'S SIGNATURE **P. John Edward, M.D.** DATE SIGNED **21c. 5:15 P.M.**
 CORONER'S PHYSICIAN'S SIGNATURE **Deputy Coroner** DATE SIGNED **22b. Oct. 26, 1981**

22a. **Bennie Beckwith**
 23a. _____
 23b. _____
 23c. _____
 23d. _____
 23e. _____
 23f. _____
 23g. _____
 23h. _____
 23i. _____
 23j. _____
 23k. _____
 23l. _____
 23m. _____
 23n. _____
 23o. _____
 23p. _____
 23q. _____
 23r. _____
 23s. _____
 23t. _____
 23u. _____
 23v. _____
 23w. _____
 23x. _____
 23y. _____
 23z. _____

24a. **Holy Cross**
 24b. **Holy Cross**
 24c. **Calumet City, Illinois**
 24d. **10-28-81**
 25a. **Wilbur Christenson Funeral Home, Ltd., 925 3rd Av., Rockford, Illinois 61108**
 25b. **Joseph Christenson, D.D.S.**
 25c. **31-7146**
 25d. **10-26-1981**

26a. _____
 26b. _____
 26c. _____
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 26s. _____
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 26v. _____
 26w. _____
 26x. _____
 26y. _____
 26z. _____

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 this record was established and filed in my office in accordance with the provisions of the Illinois Vital Statistics Act.

DATE **OCT 26 1981**
 SIGNED _____
 OFFICIAL TITLE **REGISTRAR**
 Deputy Registrar
 ROCKFORD, Illinois.

VS 307B (10/81) BUREAU OF STATISTICS - ILLINOIS DEPARTMENT OF PUBLIC HEALTH - SPRINGFIELD 62706

Warrant authorized for Springfield County, Ill.

UNOFFICIAL COPY

AFFIDAVIT OF NO ESTATE TAX DUE

The Affiant, regarding the possible liability for State Inheritance Tax for the Estate of decedent herein, being first duly sworn upon oath, deposes and states as follows:

(1) I am EVELYN F. KWIATKOWSKI
(name and capacity)

and reside at 8817 SGrandon Ave, Chicago, Illinois.

(2) I am personally acquainted with the affairs of the Estate of EDWARD C. KWIATKOWSKI
October 24, 1981, who died on October 24, 1981.

(3) That as a consequence, I represent to the Registrar of Titles that regarding Federal Estate Tax or State Inheritance Tax;

(elect one - initial choice)

- (EK) 1) that no Tax is due; or _____
_____ 2) that if any Tax due, there are sufficient other assets to pay such Tax; or _____
_____ 3) that any Tax due has been paid. _____

and I make this affidavit for the purpose of inducing the Registrar of Titles of Cook County, Illinois, to issue a Certificate of Title without additional evidence of non-liability, relying on this statement as true, and in consideration thereof affiant guarantees the truth of the statements herein contained.

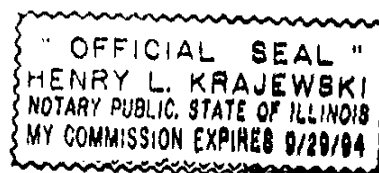
Evelyn F. Kwiatkowski
EVELYN F. KWIATKOWSKI

Subscribed and sworn to before

me this 26 day of November;

19 90.

H. Krajewski
Notary Public



3941610

(FORM 302)

Affidavit by Surviving Joint Tenant

L. R. 26181, 26182, 26183 Doc. No. 1501542-F Certificate No. 1047375

State of Illinois County of Cook ss.

EVELYN F. KWIATKOWSKI being first duly sworn, upon oath deposes and says:

That s/he resides at 831 S. Crandon Ave. in the City of Chicago and that s/he is one of the parties who took title, not in tenancy in common, but in joint tenancy, to real estate shown in Certificate of Title No. 1047375 situated in said Cook County, Illinois, described as follows: Lot Six (6) in Subdivision of the West 490 Feet of the north Half (1/2) of the Southeast Quarter (1/4) of the Northeast Quarter (1/4) of the Northeast Quarter (1/4) of Section 1, Town 37 North, Range 14, East of the Third Principal Meridian, according to Plat thereof registered in the Office of the Registrar of Titles of Cook County, Illinois, as Doc. No. 1414302.

25-01-21

Affiant states that EDWARD C. KWIATKOWSKI one of the said owners in joint tenancy, died intestate, in the city (Village) of Chicago in the State of Illinois as is confirmed by a Certificate of the health department of said municipality hereto attached.

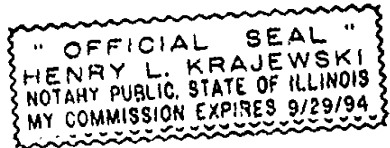
Affiant states that the remaining joint tenant has not changed her marital status since the issuance of Certificate of Title Number 1047375

Further, that the affiant makes this affidavit for the purpose of inducing the Registrar of Titles of Cook County, Illinois, to issue a certificate of title to the surviving Joint Tenant to said above described premises, relying on this statement as true, and in consideration thereof affiant guarantees the truth of the statements herein contained.

Evelyn F. Kwiatkowski EVELYN F. KWIATKOWSKI

Subscribed and sworn to before me this 26 day of November 19 90

Notary Public signature and title



3341610

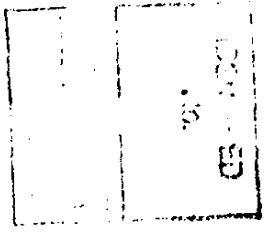
1
2047375
Not in use

3944610

3944610

UNOFFICIAL COPY

1091 FEB 19 AM 9 38
CAROL MUSEL, CLERK
REGISTRAR OF TITLES



A. KRATJEWSKI

8812 S. Commercial

Chicago, IL 60617

Property of Cook County Clerk's Office