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GINA PIMENTEL
RECORDER
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2021-062863

1:38 PM 2021 Oct 12

STATE OF INDIANA)
SS:)
COUNTY OF LAKE)

SURVIVORSHIP AFFIDAVIT

On the 12th day of October, 2021, before me personally appeared MARY A. PLYS to me personally known, who being duly sworn upon oath, did say that:

1. Affiant resides at 7845 Joliet Dr. S., Tinley Park, IL 60477.
2. Affiant is the owner of the following described property:

LOT 4 IN BLOCK 3 IN FAIRMEADOW SEVENTH ADDITION TO THE TOWN OF MUNSTER, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 41 PAGE 85, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

Commonly known as: 9117 HAWTHORN AVENUE, MUNSTER, IN 46321
Key Number: 23-329-4

3. Said premises were formerly owned by JAMES KOMECHAK.

4. On August 24, 2021, JAMES KOMECHAK executed a Transfer on Death Warranty Deed which included a Transfer on Death Declaration. Pursuant to the Transfer on Death Declaration, upon the death of JAMES KOMECHAK, the above-described real estate passed to the undersigned. Said Transfer on Death Warranty Deed was recorded August 30, 2021, as Document No. 2021-057089 in the Office of the Recorder of Lake County, Indiana.

5. Said JAMES KOMECHAK died on September 20, 2021. A certified copy of the death certificate of JAMES KOMECHAK is attached hereto as "Exhibit A".

6. To the best of Affiant's knowledge, there is no estate or inheritance tax liability by reason of the death of said decedent; and all funeral expenses and expenses of last illness have been paid in full.

7. JAMES KOMECHAK did not transfer said real estate prior to his death, nor did he amend or revoke the Transfer on Death Declaration prior to his death. Affiant is the Transferee referenced in the Transfer on Death Declaration and is the surviving daughter of said decedent, JAMES KOMECHAK.

Mary A. Plys

MARY A. PLYS

05 cc
Calm
Vt

FILED

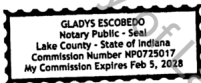
OCT 12 2021

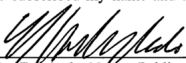
JOHN E. PETALAS
LAKE COUNTY AUDITOR

NOT AN OFFICIAL DOCUMENT

STATE OF INDIANA; SS.; COUNTY OF LAKE:

Before me, the undersigned, a Notary Public of said County/State, this 12th day of October, 2021, personally appeared MARY A. PLYS and acknowledged the execution of the foregoing instrument. In witness whereof, I have hereunto subscribed my name and affixed my official seal.





Gladys Escobedo, Notary Public
Resident of Lake County, Indiana
My Commission Expires: 2-5-2028

I affirm under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law. Thomas L. Kirsch

PREPARED BY/MAIL TO: Thomas L. Kirsch, 131 Ridge Road, #2S, Munster, IN 46321;
Attorney

NOT AN OFFICIAL DOCUMENT

DU PAGE COUNTY CLERK
WHEATON, ILLINOIS
MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2021 0084359				DATE ISSUED 9/27/2021			
DECEDENT'S LEGAL NAME JAMES R KOMECHAK				SEX MALE		DATE OF DEATH SEPTEMBER 20, 2021	
COUNTY OF DEATH DU PAGE		AGE AT LAST BIRTHDAY 83 YEARS		DATE OF BIRTH NOVEMBER 01, 1937			
CITY OR TOWN NAPERVILLE			HOSPITAL OR OTHER INSTITUTION NAME SEASONS HOSPICE INPATIENT CENTER				
PLACE OF DEATH HOSPICE FACILITY							
BIRTHPLACE GARY, IN		SOCIAL SECURITY NUMBER [REDACTED]		STATUS AT TIME OF DEATH DIVORCED FROM MARRIAGE		SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME EVER IN U.S. ARMED FORCES? YES	
RESIDENCE 9117 HAWTHORNE DR				APT. NO.	CITY OR TOWN MUNSTER		INSIDE CITY LIMITS? YES
COUNTY LAKE	STATE IN	ZIP CODE 46321	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MICHAEL KOMECHAK			MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ELIZABETH KLICH	
INFORMANT'S NAME MARY PLYS			RELATIONSHIP DAUGHTER		MAILING ADDRESS 7845 JOLIET DRIVE SOUTH, TINLEY PARK, IL, 60477		
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION ABRAHAM LINCOLN NATIONAL CEMETERY		LOCATION - CITY OR TOWN AND STATE ELWOOD, IL		DATE OF DISPOSITION OCTOBER 08, 2021	
FUNERAL HOME HICKEY MEMORIAL CHAPEL, 4201 W. 147TH, MIDLOTHIAN, IL, 60445							
FUNERAL DIRECTOR'S NAME TERRENCE B HICKEY					FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015439		
LOCAL REGISTRAR'S NAME KAREN J AYALA					DATE FILED WITH LOCAL REGISTRAR SEPTEMBER 27, 2021		
CAUSE OF DEATH PART I: GLIOBLASTOMA							
IMMEDIATE CAUSE (Final disease or condition resulting in death)							
a. _____ Due to (or as a consequence of) _____							
b. _____ Due to (or as a consequence of) _____							
c. _____ Due to (or as a consequence of) _____							
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I							
					WAS AN AUTOPSY PERFORMED? NO		
					WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A		
FEMALE PREGNANCY STATUS NOT APPLICABLE							
MANNER OF DEATH NATURAL							
DATE OF INJURY		TIME OF INJURY		PLACE OF INJURY		INJURY AT WORK?	
LOCATION OF INJURY							
DESCRIBE HOW INJURY OCCURRED:						IF TRANSPORTATION INJURY, SPECIFY:	
ATTEND THE DECEASED? NO		DATE LAST SEEN ALIVE UNKNOWN		WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO		DATE PRONOUNCED TIME OF DEATH 09:45 AM	
CERTIFIER PHYSICIAN					DATE CERTIFIED SEPTEMBER 24, 2021		
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DYMAN KWARACIAK MD, 2195 W DIEHL ROAD, NAPERVILLE, ILLINOIS, 60563						PHYSICIAN'S LICENSE NUMBER 036154382	

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

This is to certify that this is a true and correct copy from the official death record filed with the Illinois Department of Public Health.

Jan Kazmarek
County Clerk

