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2000-12-29 10:23:23
Cook County Recorder 25.50



0001019658

DECEASED JOINT TENANCY AFFIDAVIT

State of Illinois)
) ss
County of Cook)

Order No.: 000903389 1/3

LARRY HOOVER, being duly sworn states that he/she resides at 10257 S. HOKIE AVE. CHICAGO, IL 60617.

That he/she was acquainted with DOROTHY A. HOOVER, deceased who, at the time of death was one of the owners of the land in COOK County, Illinois, described as follows:

See title commitment, order number 000903389.

That the deceased died on 9/4/99, 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 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 \$ 25,000.

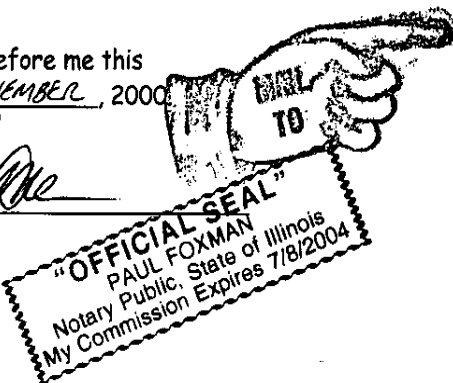
Affiant makes this affidavit for the purpose of inducing World Title Guaranty, Inc., as agent for Lawyers Title Insurance to issue its Title Insurance Policy describing the above-mentioned property.

Larry Hoover
(Affiant's signature)

Prepared by + mail to:
Anthony D. Andrews
1820 Ridge Rd #200
Homewood, IL 60430

Subscribed to and sworn before me this 20th day of NOVEMBER, 2000

Paul Foxman
(Notary Public)



STATE OF ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER
 615003

STATE OF ILLINOIS
 COUNTY OF COOK
 CITY OF CHICAGO

SEP 8 1999

I, SHARLA LYNE, RSM, 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 FOR 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 OF A RECORD KEPT BY ME IN OBTAINANCE OF SAID LAW AND ORDINANCES.



THIS CERTIFICATE COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

REGISTRATION DISTRICT NO. 16.10	DECEASED-NAME Dorothy Hoover	MIDDLE Epps	LAST Hoover	SEX Female	DATE OF DEATH 9/4/99	STATE FILE NUMBER 615003
REGISTERED NUMBER	AGE-LAST BIRTHDAY 5a. 52	UNDER 1 YEAR 5b. 0	UNDER 1 DAY 5c. 0	DATE OF BIRTH 5d. APRIL 4 1947	HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER GIVE STREET AND NUMBER) IF HOSP. OR INST. INDICATE D.O.A. OPERMER. PM. INPATIENT (SPECIFY)	
4. COUNTY OF DEATH Cook	8b. LARRY HOOPER		8a. MARRIED		Rush-Pres - St. Luke's Medical Center Inpatient	
5. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER Chicago	11a. Home maker		11b. Home		9. NO	
6a. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) Greenwood MS	12. Education		13a. Chicago		13b. Chicago	
7. SOCIAL SECURITY NUMBER 589-10-0041	13b. Chicago		13c. YES		13d. COOK	
8. RESIDENCE (STREET AND NUMBER) 10207 S. Hoxie	14a. BLACK		14b. NO		14c. YES	
9. ZIP CODE 60617	14c. YES		14d. NO		14e. SPECIFY:	
10. FATHER-NAME DYNALS	14e. SPECIFY:		14f. NO		14g. YES	
11. MOTHER-NAME T. J. EPPS	14g. YES		14h. NO		14i. SPECIFY:	
12. INFORMANT'S NAME (TYPE OR PRINT) LARRY HOOPER	14i. SPECIFY:		14j. NO		14k. YES	
13. RELATIONSHIP Husband	14k. YES		14l. NO		14m. SPECIFY:	
14. MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, E. ZIP) 10207 S. Hoxie Chicago IL	14m. SPECIFY:		14n. NO		14o. YES	
15. IMMEDIATE CAUSE (Final disease or condition resulting in death) Intracranial bleed	14o. YES		14p. NO		14q. SPECIFY:	
16. CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.	14q. SPECIFY:		14r. NO		14s. YES	
17. DUE TO, OR AS A CONSEQUENCE OF	14s. YES		14t. NO		14u. SPECIFY:	
18. PART I. Enter the diseases, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory shock, or heart failure. List only one cause on each line.	14t. NO		14v. YES		14w. SPECIFY:	
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.	14v. YES		14x. NO		14y. SPECIFY:	
19. MAJOR FINDINGS OF OPERATION	14y. SPECIFY:		14z. NO		15a. YES	
20. DATE OF OPERATION, IF ANY	15a. YES		15b. NO		15c. SPECIFY:	
21. (1)(D) (DID NOT ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON) AND (2) (TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED).	15c. SPECIFY:		15d. NO		15e. YES	
22. SIGNATURE AND ADDRESS OF CERTIFIER Deborah Wiegler	15e. YES		15f. NO		15g. SPECIFY:	
23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER	15g. SPECIFY:		15h. NO		15i. YES	
24. DR. Deborah Wiegler 1653 W. Congress Pkwy Chg IL 60612	15i. YES		15j. NO		15k. SPECIFY:	
25. DR. Robert Ferguson	15j. NO		15l. YES		15m. SPECIFY:	
26. BURIAL, CREMATION, REMOVAL (SPECIFY)	15m. SPECIFY:		15n. NO		15o. YES	
27. FUNERAL HOME	15n. YES		15p. NO		15q. SPECIFY:	
28. FUNERAL DIRECTOR'S SIGNATURE Larry Hoover	15p. NO		15r. YES		15s. SPECIFY:	
29. LOCAL REGISTRAR'S SIGNATURE Sharla Lyne	15q. SPECIFY:		15t. NO		15u. YES	
30. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)	15t. YES		15v. NO		15w. SPECIFY:	
31. DATE OF DEATH (MONTH, DAY, YEAR)	15v. YES		15x. NO		15y. SPECIFY:	
32. DATE OF BIRTH (MONTH, DAY, YEAR)	15x. NO		15z. YES		16. SPECIFY:	
33. DATE OF DEATH (MONTH, DAY, YEAR)	15z. YES		16. SPECIFY:		17. SPECIFY:	
34. DATE OF BIRTH (MONTH, DAY, YEAR)	16. SPECIFY:		17. SPECIFY:		18. SPECIFY:	
35. DATE OF DEATH (MONTH, DAY, YEAR)	17. SPECIFY:		18. SPECIFY:		19. SPECIFY:	
36. DATE OF BIRTH (MONTH, DAY, YEAR)	18. SPECIFY:		19. SPECIFY:		20. SPECIFY:	
37. DATE OF DEATH (MONTH, DAY, YEAR)	19. SPECIFY:		20. SPECIFY:		21. SPECIFY:	
38. DATE OF BIRTH (MONTH, DAY, YEAR)	20. SPECIFY:		21. SPECIFY:		22. SPECIFY:	
39. DATE OF DEATH (MONTH, DAY, YEAR)	21. SPECIFY:		22. SPECIFY:		23. SPECIFY:	
40. DATE OF BIRTH (MONTH, DAY, YEAR)	22. SPECIFY:		23. SPECIFY:		24. SPECIFY:	
41. DATE OF DEATH (MONTH, DAY, YEAR)	23. SPECIFY:		24. SPECIFY:		25. SPECIFY:	
42. DATE OF BIRTH (MONTH, DAY, YEAR)	24. SPECIFY:		25. SPECIFY:		26. SPECIFY:	
43. DATE OF DEATH (MONTH, DAY, YEAR)	25. SPECIFY:		26. SPECIFY:		27. SPECIFY:	
44. DATE OF BIRTH (MONTH, DAY, YEAR)	26. SPECIFY:		27. SPECIFY:		28. SPECIFY:	
45. DATE OF DEATH (MONTH, DAY, YEAR)	27. SPECIFY:		28. SPECIFY:		29. SPECIFY:	
46. DATE OF BIRTH (MONTH, DAY, YEAR)	28. SPECIFY:		29. SPECIFY:		30. SPECIFY:	
47. DATE OF DEATH (MONTH, DAY, YEAR)	29. SPECIFY:		30. SPECIFY:		31. SPECIFY:	
48. DATE OF BIRTH (MONTH, DAY, YEAR)	30. SPECIFY:		31. SPECIFY:		32. SPECIFY:	
49. DATE OF DEATH (MONTH, DAY, YEAR)	31. SPECIFY:		32. SPECIFY:		33. SPECIFY:	
50. DATE OF BIRTH (MONTH, DAY, YEAR)	32. SPECIFY:		33. SPECIFY:		34. SPECIFY:	
51. DATE OF DEATH (MONTH, DAY, YEAR)	33. SPECIFY:		34. SPECIFY:		35. SPECIFY:	
52. DATE OF BIRTH (MONTH, DAY, YEAR)	34. SPECIFY:		35. SPECIFY:		36. SPECIFY:	
53. DATE OF DEATH (MONTH, DAY, YEAR)	35. SPECIFY:		36. SPECIFY:		37. SPECIFY:	
54. DATE OF BIRTH (MONTH, DAY, YEAR)	36. SPECIFY:		37. SPECIFY:		38. SPECIFY:	
55. DATE OF DEATH (MONTH, DAY, YEAR)	37. SPECIFY:		38. SPECIFY:		39. SPECIFY:	
56. DATE OF BIRTH (MONTH, DAY, YEAR)	38. SPECIFY:		39. SPECIFY:		40. SPECIFY:	
57. DATE OF DEATH (MONTH, DAY, YEAR)	39. SPECIFY:		40. SPECIFY:		41. SPECIFY:	
58. DATE OF BIRTH (MONTH, DAY, YEAR)	40. SPECIFY:		41. SPECIFY:		42. SPECIFY:	
59. DATE OF DEATH (MONTH, DAY, YEAR)	41. SPECIFY:		42. SPECIFY:		43. SPECIFY:	
60. DATE OF BIRTH (MONTH, DAY, YEAR)	42. SPECIFY:		43. SPECIFY:		44. SPECIFY:	
61. DATE OF DEATH (MONTH, DAY, YEAR)	43. SPECIFY:		44. SPECIFY:		45. SPECIFY:	
62. DATE OF BIRTH (MONTH, DAY, YEAR)	44. SPECIFY:		45. SPECIFY:		46. SPECIFY:	
63. DATE OF DEATH (MONTH, DAY, YEAR)	45. SPECIFY:		46. SPECIFY:		47. SPECIFY:	
64. DATE OF BIRTH (MONTH, DAY, YEAR)	46. SPECIFY:		47. SPECIFY:		48. SPECIFY:	
65. DATE OF DEATH (MONTH, DAY, YEAR)	47. SPECIFY:		48. SPECIFY:		49. SPECIFY:	
66. DATE OF BIRTH (MONTH, DAY, YEAR)	48. SPECIFY:		49. SPECIFY:		50. SPECIFY:	
67. DATE OF DEATH (MONTH, DAY, YEAR)	49. SPECIFY:		50. SPECIFY:		51. SPECIFY:	
68. DATE OF BIRTH (MONTH, DAY, YEAR)	50. SPECIFY:		51. SPECIFY:		52. SPECIFY:	
69. DATE OF DEATH (MONTH, DAY, YEAR)	51. SPECIFY:		52. SPECIFY:		53. SPECIFY:	
70. DATE OF BIRTH (MONTH, DAY, YEAR)	52. SPECIFY:		53. SPECIFY:		54. SPECIFY:	
71. DATE OF DEATH (MONTH, DAY, YEAR)	53. SPECIFY:		54. SPECIFY:		55. SPECIFY:	
72. DATE OF BIRTH (MONTH, DAY, YEAR)	54. SPECIFY:		55. SPECIFY:		56. SPECIFY:	
73. DATE OF DEATH (MONTH, DAY, YEAR)	55. SPECIFY:		56. SPECIFY:		57. SPECIFY:	
74. DATE OF BIRTH (MONTH, DAY, YEAR)	56. SPECIFY:		57. SPECIFY:		58. SPECIFY:	
75. DATE OF DEATH (MONTH, DAY, YEAR)	57. SPECIFY:		58. SPECIFY:		59. SPECIFY:	
76. DATE OF BIRTH (MONTH, DAY, YEAR)	58. SPECIFY:		59. SPECIFY:		60. SPECIFY:	
77. DATE OF DEATH (MONTH, DAY, YEAR)	59. SPECIFY:		60. SPECIFY:		61. SPECIFY:	
78. DATE OF BIRTH (MONTH, DAY, YEAR)	60. SPECIFY:		61. SPECIFY:		62. SPECIFY:	
79. DATE OF DEATH (MONTH, DAY, YEAR)	61. SPECIFY:		62. SPECIFY:		63. SPECIFY:	
80. DATE OF BIRTH (MONTH, DAY, YEAR)	62. SPECIFY:		63. SPECIFY:		64. SPECIFY:	
81. DATE OF DEATH (MONTH, DAY, YEAR)	63. SPECIFY:		64. SPECIFY:		65. SPECIFY:	
82. DATE OF BIRTH (MONTH, DAY, YEAR)	64. SPECIFY:		65. SPECIFY:		66. SPECIFY:	
83. DATE OF DEATH (MONTH, DAY, YEAR)	65. SPECIFY:		66. SPECIFY:		67. SPECIFY:	
84. DATE OF BIRTH (MONTH, DAY, YEAR)	66. SPECIFY:		67. SPECIFY:		68. SPECIFY:	
85. DATE OF DEATH (MONTH, DAY, YEAR)	67. SPECIFY:		68. SPECIFY:		69. SPECIFY:	
86. DATE OF BIRTH (MONTH, DAY, YEAR)	68. SPECIFY:		69. SPECIFY:		70. SPECIFY:	
87. DATE OF DEATH (MONTH, DAY, YEAR)	69. SPECIFY:		70. SPECIFY:		71. SPECIFY:	
88. DATE OF BIRTH (MONTH, DAY, YEAR)	70. SPECIFY:		71. SPECIFY:		72. SPECIFY:	
89. DATE OF DEATH (MONTH, DAY, YEAR)	71. SPECIFY:		72. SPECIFY:		73. SPECIFY:	
90. DATE OF BIRTH (MONTH, DAY, YEAR)	72. SPECIFY:		73. SPECIFY:		74. SPECIFY:	
91. DATE OF DEATH (MONTH, DAY, YEAR)	73. SPECIFY:		74. SPECIFY:		75. SPECIFY:	
92. DATE OF BIRTH (MONTH, DAY, YEAR)	74. SPECIFY:		75. SPECIFY:		76. SPECIFY:	
93. DATE OF DEATH (MONTH, DAY, YEAR)	75. SPECIFY:		76. SPECIFY:		77. SPECIFY:	
94. DATE OF BIRTH (MONTH, DAY, YEAR)	76. SPECIFY:		77. SPECIFY:		78. SPECIFY:	
95. DATE OF DEATH (MONTH, DAY, YEAR)	77. SPECIFY:		78. SPECIFY:		79. SPECIFY:	
96. DATE OF BIRTH (MONTH, DAY, YEAR)	78. SPECIFY:		79. SPECIFY:		80. SPECIFY:	
97. DATE OF DEATH (MONTH, DAY, YEAR)	79. SPECIFY:		80. SPECIFY:		81. SPECIFY:	
98. DATE OF BIRTH (MONTH, DAY, YEAR)	80. SPECIFY:		81. SPECIFY:		82. SPECIFY:	
99. DATE OF DEATH (MONTH, DAY, YEAR)	81. SPECIFY:		82. SPECIFY:		83. SPECIFY:	
100. DATE OF BIRTH (MONTH, DAY, YEAR)	82. SPECIFY:		83. SPECIFY:		84. SPECIFY:	

ILLINOIS DEPARTMENT OF PUBLIC HEALTH - DIVISION OF VITAL RECORDS
 ILM 200 (Rev. 7/86)

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LOT 46 AND THE NORTH 13.4 FEET OF LOT 45 IN BLOCK 192 IN SOUTH CHICAGO, BEING A SUBDIVISION BY CALUMET AND CHICAGO CANAL AND DOCK COMPANY OF PART OF SECTION 7, TOWNSHIP 37 NORTH, RANGE 15, EAST OF THE THIRD PRINCIPAL MERIDIAN AND SECTION 12 AND SECTION 13, TOWNSHIP 37 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN ACCORDING TO THE PLAT THEREOF RECORDED AUGUST 4, 1875 IN BOOK 9 OF PLATS AS DOCUMENT NO. 42641, IN COOK COUNTY, ILLINOIS.

P.I.N. 25-12-430-067

10207 S. Hoxie
Chicago, IL 60617

Property of Cook County Clerk's Office