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MAIL TO BOX 352



0020221469

FIRST AMERICAN EQUITY LOAN SERVICES

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AFFIDAVIT REGARDING DECEASED JOINT TENANT

2002-02-26 10:07:57
Cook County Recorder 47.00



STATE OF ILLINOIS

DATE January 18, 2002

COUNTY OF Cook

COMMITMENT NO:03022132

3022032

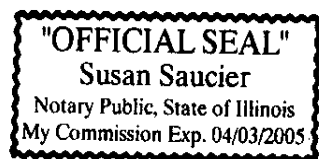
Barbara E. Hewitt, being first duly sworn, for the purpose of inducing First American Title Insurance Company of the Mid-West to issue its' title insurance policy covering land described in above captioned commitment, deposes and says;

1. That he/she resides at: 3140 W. Whipple Drive Merrionette Park, IL 60803
2. That he/she was acquainted with Walter Hewitt who died on June 18, 1991, as evidenced by the attached certified copy of the death certificate.
3. That said decedent was one of the owners of the land described in the above Captioned commitment.
4. That said decedent died:
 Leaving no last will and testament
 leaving a last will and testament, a copy of which is attached.
5. That the total value of said decedent's estate for State of Illinois Inheritance Tax/ Estate Tax and Federal Estate Tax purposes does not exceed \$.

Barbara E. Hewitt
Affiant's Signature

Subscribed and sworn to before me this 18th day of January 20 02

Susan Saucier
Notary Public



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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 Records Act.

JUL 1 1991

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DATE _____ SIGNED James Thompson, RN
 At Henry County Health Dept., Kewanee, Illinois OFFICIAL TITLE Henry County Registrar (37.1)

The original record of this death is permanently filed with the ILLINOIS DEPARTMENT OF PUBLIC HEALTH at Springfield. County clerks and local registrars are authorized to make certifications from copies of the original record. The Illinois statutes provide that the certification of a death record by the Department of Public Health, local registrar or county clerk shall be prima facie evidence in all courts and places of the facts therein stated.

VR-201C (1978)

OFFICE OF VITAL RECORDS - ILLINOIS DEPARTMENT OF PUBLIC HEALTH - SPRINGFIELD 62761

MEDICAL EXAMINER'S - CORONER'S
 CERTIFICATE OF DEATH

STATE OF ILLINOIS

STATE ID#

NUMBER

U100134420

REGISTRATION DISTRICT NO. 37.1
 REGISTERED NUMBER _____
 DECEASED-NAME FIRST Walter MIDDLE Edward LAST Hewitt SEX 2 Male DATE OF DEATH (MONTH, DAY, YEAR) June 18, 1991

1. COUNTY OF DEATH Henry AGE-LAST BIRTHDAY (YRS) 36 UNDER 1 YEAR MOS | DAYS UNDER 1 DAY HOURS | MIN DATE OF BIRTH (MONTH, DAY, YEAR) 5d October 12, 1954
 CITY, TOWN, TWP. OR ROAD/DISTRICT NUMBER _____ HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) _____

6a. Geneseo BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) IL 6b. Hammond-Henry Hospital NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)
 7. Evergreen Park 8a. Married 8b. Barbara Niedzielski
 SOCIAL SECURITY NUMBER _____ USUAL OCCUPATION _____ KIND OF BUSINESS OR INDUSTRY _____
 10. 334-50-0868 11a. Carpenter 11b. Construction EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) _____
 RESIDENCE (STREET AND NUMBER) _____ CITY, TOWN, OR ROAD/DISTRICT NO. _____ INSIDE CITY (YES/NO) _____ COUNTY _____

13a. 3140 W. Whipple Dr. 13b. Merrionette Park 13c. Yes 13d. Cook
 STATE ZIP CODE _____ (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.)
 13e. Illinois 13f. 60655 14a. White 14b. YUNO 14c. YES SPECIFY: _____
 FATHER-NAME FIRST MIDDLE LAST _____ MOTHER-NAME FIRST MIDDLE LAST _____

15. INFORMANT'S NAME (TYPE OR PRINT) Harold Edward Hewitt Sr. RELATIONSHIP Ruth Ann Hansen MARRIAGE ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) 17c. 3140 W Whipple Dr Merrionette Park STE 20655
 17a. Barbara Hewitt 17b. wife 17c. 3140 W Whipple Dr Merrionette Park

18. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause for each line.
 Immediate Cause (Final disease or condition resulting in death) Cardiac Arrest
 CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) External Blow to chest
 STATING THE UNDERLYING CAUSE LAST. (b) Due to, or as a consequence of
 (c) Due to, or as a consequence of

PART II. Other significant conditions contributing to death but not resulting in the underlying causes given in PART I.
 NATURAL, ACCIDENT, HOMICIDE, SUICIDE, UNDETERMINED, (SPECIFY) 20a. Homicide DATE OF INJURY (MONTH, DAY, YEAR) June 18, 1991 HOUR 8:30 P.M. HOW INJURY OCCURRED (ENTER NATURE OF INJURY MENTIONED IN PART I OR PART II, ITEM 18) 20d. Fight AT County Fairgrounds
 INJURY AT WORK (YES/NO) Yes PLACE OF INJURY (STREET, FACTORY, OFFICE, BUILDING, ETC.) (SPECIFY) 20c. Cambridge, Henry Co., IL FEMALE WAS THERE (A RE-ENTRY IN PAST THREE MONTHS)? 20h. YES

I CERTIFY THAT IN MY CAPACITY AS AN INVESTIGATOR AND/OR THE INQUIRY, THIS DEATH OCCURRED ON THE DATE, AT THE PLACE AND DUE TO THE CAUSE(S) STATED, AND THAT _____
 CORONER-SIGNATURE James Thompson, RN DATE SIGNED (MONTH, DAY, YEAR) July 11, 1991
 CORONER'S PHYSICIAN'S SIGNATURE _____ DATE SIGNED (MONTH, DAY, YEAR) _____

23a. BURIAL, CREMATION, REMOVAL (SPECIFY) _____ CEMETERY OR CREMATORY-NAME _____ LOCATION _____ CITY OR TOWN _____ STATE _____ DATE (MONTH, DAY, YEAR) _____
 24a. Willow Hills Mem. Pk. 24b. Willow Hills Springs, IL 24c. Willow Springs, IL 24d. June 22, 1991

25a. Stackhouse-Moore Funeral Homes, 225 E. Park St. Box 269 Geneseo, IL 61254
 FUNERAL DIRECTOR'S SIGNATURE _____ DATE (MONTH, DAY, YEAR) _____
 LOCAL REGISTRAR'S SIGNATURE _____ DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) _____

26a. _____ DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) _____
 26b. _____ DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) _____

VR202 (Rev. 1-89) Illinois Department of Public Health - Office of Vital Records (BASED ON 1989 U.S. STANDARD CERTIFICATE)

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Lot 3 in MAHONEY ESTATE SUBDIVISION of the north 3/4 of the west 1/2 of the southwest 1/4 of section 24, township 37 north, range 13 east of the 3rd principal meridian (except the right of way of Chicago and Southern Railroad Company), in COOK COUNTY, ILLINOIS.

The Real Property or its address is commonly known as 3140 W WHIPPLE DRIVE, MERRIONETTE PARK , IL 60803. The Real Property tax identification number is 24-24-310-003-0000.

Property of Cook County Clerk's Office 20221469