

10:59:55 2002-06-14

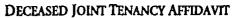
Cook County Recorder

Above for Recorder's Use

Deceased Joint Tenancy Affidavit

Property Address: 3724 N. Normandy
Chso, IL 60634

ISSUED BY
COMMONWEALTH LAND TITLE INSURANCE COMPANY





Commonwealth

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS COUNTY OF ss. Order No
William J. Tibbetts being duly swom
states that he resides at 3134 N. Normand, in the City of
Chicago, IL 60634
That he was acquainted with Veronica L. Tibbetts
deceased who, at the time of her death, was one of the owners of the land in
See attacked logal Description
0/s COO4
That the deceased died, 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 of the 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 Vill Box of the Porbate Division of the Circuit Court ofCounty, 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 \$\frac{1}{20},000\$ dollars.
Affiant makes this affidavit for that purpose of inducing the Commonwealth Land Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.
Subscribed and sworn to before me by the said
William J. Tibbetts "OFFICIAL SEAL" Thomas F. Patrasso
this 6th day of June, 266), 19 Notary Public, State of Illinois My Commission Exp. 03/04/2006
Notary Public (Affiant's Signature)

UNOFFICIAL COPY

THE SOUTH 38 FEET OF LOT 12 FIRST ADDITION TO MONT CLARE GARDENS BEING A SUBDIVISION OF THE WEST 1/2 OF THE NORTHEAST 1/4 (EXCEPT RAILROAD) OF SECTION 30, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PERMANENT INDEX NO.: 13-30-201-026-0000

PROPERTY ADDRESS: 3134 N. NORMANDY, CHICAGO, IL 60634

epared by:

St. Charles,
Mail to: Thomas F. Patrasso

201 Abbey wood Pr.

St. Charles, IL 60634

BLUE SIGNATURE ARE AFFIXED WHEN MULTICOLOR SEAL AND THIS CERTIFIED COPY VALID

VR200 (Rev 1 89) 26a. ▼ **(**

C. GAMARIA MA MPA.

DATE FILEDBY LOCAL REGISTRAR (MONTH ON BOAR)

8189



SAID LAWS AND ORDINANCES. STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO: THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY AS A RECORD KEPT BY ME IN PURSUANCE OF LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF AND DEATHS OF THE RECORDS VIRTUE OF I OF BIRTHS, BIRTHS, STILLBIRTHS
THE CITY OF CHICAGO
THE LAWS OF THE

STATE OFFILLINOIS COUNTY OF COOK CITY OF CHICAGO SS

STATE FILE

HTH NO.

REGISTRATION DISTRICT NO.

16.10

STATE OF ILLINOIS

	REGISTERED NUMBER	MEI	DICAL C	ERTIFIC	ATE OF	DEATH	000	0/6/0
NX is	DECEASED-NAME F	FIRST	WIDDLE	[3]	SEX	DATEOF		- 1
icians	COUNTY OF DEATH .		AGE-LAST	UNDER 1 YEAR	UNDER I DAY D	DATE OF BIRTH IMPOUTH DAY	udr.y	24, 1989
NS.			BIRTHDAY (YRS) 5a. 76	MOS. DAYS	HOURS MIN. 5d.	. April	•	
	CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER	TNUMBER	HOSPITAL OR OTH	ER INSTITUTION-A	(IF NOT IN EITHER	VE STREET AND NUMBE	`	IFHOSP, OR INST, INDICATED O A.
:	6a. Chicago		66. St. El	izabeth's	s_Hospital			INDATIENT (SPECI
ED	SHIR	ŏ₩	ORCED (SPECIFY)	NAME OF SURVIVING SPOUSE		(MAIDEN NAME, IF WIFE)		WAS DECEASED EVER IN U.S.
	COCAL SECURITY NITURES	8a. WIGOWED	Wed	8b. None	ł		ı	9. No
:	325-03-0413	6uidue)			SOHINDUSTRY	EDUCATION (SPECIFY ON Elementary/Secondary (0-12)	بازر	'HIGHEST GRADE COMPLETED) College (1-4 or 5 +)
:	RESIDENCE (STREET AND NUMBER)	Tia. MdCII	WOY Ker	TOWN OBBOADING		12. 8		
:					a not we.	(YES:NO)	COUNTY	7
:	3134 North	andy		icaç		13c. Y	S 13d.	Cook
)634 	LAN, etc.) (SPECIFY)		ISPANIC ORIGIN?	(SPECIFY NO OR YES-IF YES	SPE	CIFY CUBAN. (EX.C.A) PUERTO RICAN, etc.)
	IRST	MIDDLE	_		핆	ST MIDDLE		AST
	Boleslaw	S	zarauski	16.	√i	tori;	ה ה ה	
	INFORMANT'S NAME (TYPE OR PRINT)	į	4	RELATIONSHIP	MAILING ADDRESS	(STREET AND NO ORREA	40.0	TYOF TOWN STATE ZIP)
:		S		17b. Son	17c. 3134 N	. Normandy	Chicago,	o, Il 60634
:	Enler the diseases, injuries, or con	spications that caused the	ns that caused the death. Do not enter the mo	mode of dying, such as cardian	or respiratory arrest, shock, or h	or heart tailure. List only now conse on each line.	se on each line.	APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
: :	usease or condition (a)		\mathbb{N}	3/2/cx0/16	T	< AM 1 1/2	अस्वरव	13 C C C C C C C C C C C C C C C C C C C
:	CONDITIONS, IF ANY (b)] _ā	POP P100	アハ	1 Jack	K. 4. N.C.O		イ (((() ()
	STATING THE UNDERLYING (c)		ACONSEGUENCE OF	ri D	K-C-24-C-C-24			
:	PART II. Other significant contributing to dealinbul not resulting in the underlying cause given in PART	iting to death but not re	sulting in the underlying ca	use given in PARTI.		AUTOPSY (YES/NO)	/	WENGAUTOPSY FINDINGS NVALABLE PRIOR TO COMPLETION OF CAUSE OF DEATHY (YES NO)
:	DA E OF OPERATION IF ANY	MA DE FINDING	S OF OBERATION		×	19a.	0	ONOF CAUSE OF DEATH?(YE
<u> </u>	E OF OFERALION, IF ANY	MAJORFINDINGSOF	SOF OPERATION		C	, I =	FEMALE, WAS THEF	IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS?
<u>:</u>	(DID) (DID NOT) ATTEND THE DECEASED	ľ	(MONTH, DAY, YEAR)		WAS	ž_	HOUR OF DEATH	1 NOCA
:			X V	-	21b.	21b. NO	21c.	11:30 A _{M.}
		ATHOCCURRED	AT THE TIME, DATE AND	<u></u>	CE AND DUE TO THE CAUSE(S) STATED	STATED.	DATESIGNED	
끍	NAME AND ADDRESS OF CERTIFIER	(TYPE OR PRINT)		2			22b. January 26	January 26, 1989
	22c. Dr. N. Rubio 3	3758 W. (Chicago Ave	e Chicago), Illinois		994 03-60	03-6045347
	NAME OF ATTENDING PHYSICIAN IF O 23.	OTHER THAN CERTIFIER	TIFIER (1 PEORPRINT)					IF AN INJURY WAS INVOLVED IN THIS 1THE CORONER OR MEDICAL EXAMINER BE NOTIFIED.
_	BURIAL, CHEMATION, CEN	CEMETERY OR CREMATORY-NAME	JANN-YAOTAN	LOCATION	TION CITYORTOWN	WN STATE	DATE	TE (MONTH, DAY, YEAR)
	24a. BUT161 24b	St.	Joseph	<u> </u>	River	Grove, Il	240	24dJan.27,1989
Ö	Dotowe Con E	NAME	STAE	20		A TOWN	STATE	diZ
	FUNERAL DIRECTOR'S SIGNATURE	I HOME P	0938	west North	th Avenue	Chicago,	Illinois	s 60635
		,	-			TUNERAL DIRECTO	T A FEINOIS LICENSE NOMBER	E NOWBER