(1)

JNOFFICIAL CO

2002-05-29 10:13:48

Cook County Recorder

25.50

Stephen W. Taylor, Atty. DeBruyn, Taylor and DeBruyn Ltd. 15252 S. Harlem Avenue Orland Park, IL 60462

DECEASED JOINT

TENANCY_AFFIDAVIT

NAME/ADDRESS OF TAXPAYER:

SS.

Herbert F. Meagher Jr. 18228 Montana Court Orland Park, IL 60467

STATE OF ILLINOIS)

COUNTY OF COOK)

Herbert F. Meagher Jr., being duly sworn, states that he resides at 18228 Montana Court, Orland Park, IL 60467.

That Herbert F. Meagher Jr. was acquainted with LUELLA M. MEAGHER, deceased, who, at the time of her death, was one of the owners of the land in Cook County, Illinois, described as:

(SEE REVERSE SIDE FOR LECAL DESCRIPTION)

Permanent Index No.:

27-32-400-027-1035

Address of Real Estate:

18228 Montana Court, Orland Park, 12 50467

That the deceased died on October 1, 2001, as evidenced by a certified opp 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 Cook, Illinois.

Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of Cook, Illinois, about _ May 2002

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 require the payment of Federal or State Inheritance taxes.

MIGF, INC.

UNOFFICIAL COPY

Affiant makes this affidavit for the purpose of inducing the title company to issue its title insurance policy, describing the above mentioned property.

20604932

Subscribed and sworn to before me by the said

HERBERT F. MEAGHER JR.

this // day of May, A.D. 2002.

Notary Public

* Herbert F. Meagher Jr.

This Instrument Prepared By

Stephen W. Taylor, Atty.
DeBruyn, Taylor and DeBruyn Ltd.
15252 S. Harlem Avenue
Orland Park, IL 60462

STEPHEN W FAYLOR
Notary Public Plate of Illinois
Try Commission Control of the Page

LEGAL DESCRIPTION

Unit 77 in Eagle Ridge Condominium Unit II, as delineated on a survey of the following described real estate: That part of the Southeast guarter of Section 32, Township 36 North, Range 12, East of the Third Principal Meridian, which survey is attached as Exhibit "A" to the Declaration of Condominium recorded as Documen Number 91315399 and as amended from time to time together with its undivided percentage interest in the common elements, in Cook County, Illinois.

Permanent Real Estate Index Number:

27-32-400-027-1035

Address of Real Estate:

18228 Montana Court, Orland Fark, !L 60467

in my office in accordance with the provisions of the Illinois statues relating to the registration of births, stillbirths and deaths. 2001 3, Date Signed At Cook County Department of Public Health Offi 1010 Lake Street, Oak Park, Illinois 60301 20604932 ō REGISTERED NUMBER REGISTRATION DISTRICT NO. CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST. COUNTY OF DEATH 4. COOK
CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER DECEASED-NAME SOCIAL SECURITY NUMBER BIRTHPLACE (CITYAND STATE OF FOREIGN COUNTRY)
7 CHICAGO, ILLIN RESIDENCE (STREET AND NUMBER) 3a 18228 MONTANA COURT NAME AND ADDRESS OF SER TIFER DATE OF OPERATION, IF ANY PART II. Other significant conditions contributing to death but not rec. thing in the underlying cause given in PART I.

ATTACK HOLL ACTION, NO. 1. 2 + WINTER VILLE ON ILLIAM. TO THE BEST OF MY KNOWLEDGL DE ATHOCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED. NAME OF ATTENDI. G PHYSICIAN IF OTHER THAN CERTIFIER BURIAL, CREMATION, REMOVAL (SPECIFY) resulting in death) 24a. ENTOMBMENT disease or condition 255. 339-18-5656 PALOS HEIGHTS SIGNATURE > ILLINOIS HERBERT MEAGHER, 15300 went auc. REGISTRAR ILLINOI\$6a. MARRIED 6 LUELLA Enter the diseases, 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 on each line. Ö ZIP CODE <u>3</u> (b) Ity Pull man mul 24bHOLY CEMETERY OF CREMATORY-NAME DUE TO, OR AS A CONSEQUENCE OF GEORGE MIDOLE MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) 60467 11a. USUAL OCCUPATION MAJOR FIND NOS OF OPERATION MEDICAL CERTIFICATE HOMEMAKER JR. SEPULCHRE MAUSOLEUMO MONTH, DAY, YEAR) Sait morne BIRTHOMY (YRS) HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) Ζ MIDDLE PALOS 9000 W. 757 STREET AND NUMBER OR R.F.D. 13b. 1017 STATE OF ILLINOIS RELATIONSHIP 17bSPOUSE TOWN, TWP, OR ROAD DISTRICT NO. COMMUNITY HOSPITAL NAME OF SURVIVING SPOUSE (MAIDENNAME, IF WIFE) morning 8b. HEALD OF BUSINESS OR INDUSTRY ORLAND PARK bulond ROBERT 151st ST., ORLAND PARK, MEAGHER OWN HOME HERBERT F. DAYS LOCATION OF HISPANIC ORIGIN? MOTHER- ('AME 4 HOURS dispase my 7618228 MONTANA CT., ORLAND PARK, SHEEHY WORTH, LL CITY OR TOWN my pur chartestur lemme OF DEATH MEAGHER, FEMALE 216. EXAMINER NOTIFIED? CITY OR TOWN DATE OF BIRTH (MONTH, DAY, YEAR) 5d.APRIL 27, 1923 なること SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.) EDUCATION (St. FC. FYONLY HIGHEST GRADE COMPLETED)

Elementary/5 coords y (0-12)

College (1-4 or 5 +) (STREET AND NO. ORR.F.D., CITY OR TOWN, STATE, 240467 FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER DATE FILED BY LOCAL REGISTRAR (MOI NSIDE CITY SPECIFY: 3 OCTOBER 1, DATE OF DEATH (MONTH, DAY, YEAR) AUTOPSY (YES/NO) YES IFFEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? HOUR OF DEATH 210 ILLINOIS LICENSE NUMBER DATE SIGNED NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER IF HOSP, OR INST, INDICATE D.O.A. 13d. YES | NO BE 011841WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (YES/NO) 195. 036-068886 9:05 DATE 24d.OCT. COOK WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO) APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH 10/3/01. ಬ PM (MONTH, DAY, YEAR) (MONTH, DAY, YEAR) 200

Z

THEREBY CERTIFY THAT the foregoing is derivative and correct copy of the death record for the decedent named in item I and that this record was established and filled