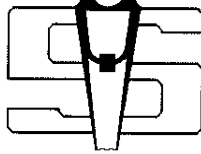


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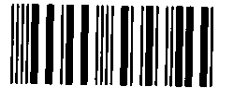
00332571

02/16/0047 21 001 Page 1 of 3
2000-05-10 13:29:23
Cook County Recorder 47.50



Sanctity of Contract

Stewart Title Company of Illinois



00332571

106301

STEWART TITLE OF ILLINOIS
2 N. LA SALLE ST., SUITE 1820
CHICAGO, ILLINOIS 60602

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS)
COUNTY OF) SS.

STCI File Number: 106301

Robin E. Jones

being duly sworn states that she resides at 2938 W. Washington in the City of

That she was acquainted with Andrew W. Jones deceased who, at the time of death, was one of the
sworn of the land in Cook County, Illinois, describes as:

950 W 115th PL CHGO

That the deceased died October 31, 1996 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 Cook County, Illinois.
- ✗ Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of Cook 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 45,000 dollars.

Affiant makes this affidavit for the purpose of inducing Stewart Title Company to issue its Title Insurance Policy, describing the above mentioned property.

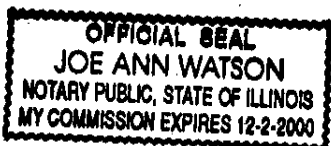
Subscribed and sworn to before me by the said

[Signature]

this 20 day of April, A.D. 192000

[Signature]
Notary Public

[Signature]
(Affiant's Signature)



UNOFFICIAL COPY

00332571

STATE OF ILLINOIS)
County of Cook)

DAVID ORR, County Clerk

APR 10 2000

I, DAVID ORR, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County, do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.

IN WITNESS THEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the City of Chicago, in said County.

David Orr
COUNTY CLERK

REGISTRATION DISTRICT NO. 16.10		STATE OF ILLINOIS		STATE FILE NUMBER	
REGISTERED NUMBER		MEDICAL CERTIFICATE OF DEATH		620662	
DECEASED-NAME		FIRST	MIDDLE	LAST	SEX
1. ANDREW W. JONES					2. MALE
COUNTY OF DEATH		AGE—LAST BIRTHDAY (YRS)		UNDER 1 YEAR	DATE OF BIRTH (MONTH DAY YEAR)
3. COOK		5a. 79	5b. 79	5c. 79	3. OCTOBER 31, 1995
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER		HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)		IF HOSP OR INST INDICATED (CLASS OF EMER/INPATIENT) (SPECIFY)	
6a. CHICAGO		6b. V A WEST SIDE MEDICAL CENTER		6c. INPATIENT	
BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)		NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)	
7. ATHENS, GA		8a. MARRIED		8b. MARGRET (WILLIAMS)	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION		KIND OF BUSINESS OR INDUSTRY	
10. 260-05-5519		11a. ATTENDANT		11b. HOSPITAL	
EDUCATION (SPELIFY ONLY HIGHEST GRADE COMPLETED)		RESIDENCE (STREET AND NUMBER)		CITY, TOWN, OR ROAD DISTRICT NO.	
12. 12		13a. 1500 W MADISON		13b. CHICAGO	
INSIDE CITY (YES/NO)		STATE		ZIP CODE	
13c. YES		13a. ILLINOIS		13b. 60607	
RACE (WHITE, BLACK, AMERICAN INDIAN, ETC.) (SPECIFY)		OF HISPANIC ORIGIN (SPECIFY ORIGIN IF YES, SPECIFY FOREIGN AMERICAN POLYNESIAN, ETC.)		14b. XNO YES SPECIFY	
14a. BLACK					
FATHER-NAME FIRST MIDDLE LAST		MOTHER-NAME FIRST MIDDLE LAST		16. LUCY (HARRIS)	
15. ANDREW JONES		16. LUCY (HARRIS)			
INFORMANT'S NAME (TYPE OR PRINT)		RELATIONSHIP		MAILING ADDRESS (STREET AND NO OR P.O. CITY OR TOWN STATE ZIP)	
17a. JERRY EISEN		17b. HOSPITAL RECORD		17c. P.O. BOX 8195 CHICAGO IL 60680	
PART I. State the disease, injury, or complication that caused the death. Do not use the word "of" (e.g., "cardiovascular disease") or "heart failure." List only one cause on each line.					
Immediate Cause (Final disease or condition resulting in death)		(a) RUPTURED ABDOMINAL AORTIC ANEURYSM			
CONDITIONS, IF ANY, WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST		(b) _____			
		(c) _____			
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.					
DATE OF OPERATION IF ANY		MAJOR FINDINGS OF OPERATION		19a. NO	
20a. _____		20b. _____		19b. _____	
IF (DID) (DID NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON (MONTH DAY YEAR)		WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO)		HOUR OF DEATH	
21a. 10/31/95		21b. NO		21c. 10:12	
TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED		22a. SIGNATURE		DATE SIGNED	
		22b. 10/31/95		ILLINOIS LICENSE NUMBER	
NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT)		22c. JAMES DOHERTY M.D. 820 S. DAMEN AVE CHICAGO, IL. 60612		22d. PERMIT	
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)		23. _____		NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH, THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.	
BURIAL, CREMATION REMOVAL (SPECIFY)		CEMETERY OR CREMATORY NAME		LOCATION (CITY OR TOWN STATE)	
24a. Burial		24b. Evergreen		24c. Evergreen Park, Illinois	
FUNERAL HOME		NAME		STREET AND NUMBER (CITY OR TOWN STATE)	
25a. Johnson's Funeral Home, 409 W. North Ave., Chicago, Illinois, 60610		FUNERAL DIRECTOR'S SIGNATURE		DATE (MONTH DAY YEAR)	
25b. <i>Mark H. Heath</i>		25c. 074-008828		25d. NOV 03 1995	
LOCAL REGISTRAR'S SIGNATURE		25e. <i>David Orr, RSM</i>		25f. _____	

LEGAL DESCRIPTION

EXHIBIT "A"

File No.: 106301

The west 29.01 feet of the east 87.10 feet of lot 1 in Maple Park Court, being a resubdivision of part of Stanley Mathews subdivision in the west 1/2 of the southeast 1/4 also part of Chytraus and Deneen's addition to West Pullman in the east 1/2 of the southeast 1/4 together with vacated streets and alleys all in section 20, township 37 north, range 14, east of the third principal meridian, in Cook County, Illinois

25-20-404-062

Robin E. Jones
950 West 115th Place
Chicago, Illinois 60643



Property of Cook County Clerk's Office