

# UNOFFICIAL COPY

DECEASED JOINT TENANCY AFFIDAVIT  
COVER SHEET



Doc#: 0407245117  
Eugene "Gene" Moore Fee: \$30.50  
Cook County Recorder of Deeds  
Date: 03/12/2004 10:25 AM Pg: 1 of 4

Property of Cook County Clerk's Office

Prepared By:

ANTHONY PANZICA  
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AD3-3212-RAHON

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STATE OF ILLINOIS}
} SS
COUNTY OF COOK}

## DECEASED JOINT TENANCY AFFIDAVIT

Willie Maie Mitchell, Hereinafter referred to as the affiant, states under oath that the affiant resides at 5508 W. Quincy in the City of Chicago, Illinois; that the affiant was acquainted with Fred Mitchell, the decedent; that at the time of death, the decedent was one of the owners of property, by virtue of a properly recorded joint tenancy warranty deed, said property, located in Cook County, Illinois, and legal described as follows:

LOTS 3 AND 4 IN THE SUBDIVISION OF LOTS 133 AND 152 IN THE SCHOOL TRUSTEE'S SUBDIVISION OF THE NORTH PART OF SECTION 16, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

That the decedent has no interest in any business or partnership, nor held any power of appointment at death, nor created any remainder interests in property by transfer with retention of a life interest therein or the creation of interests to take effect in possession or enjoyment after death;

That the decedent died on, 1-11-1998, leaving no/a last will and testament;

That the total value of decedent's estate, including the taxable interest in the above property was 126,000.00, and that the value of the above property individually was 126,000.00.

That the Illinois inheritance Tax and the Federal Estate tax, if any, was due from the decedent's estate, has been paid in full;

That the affiant hereby covenants and agrees, for himself/herself/themselves, heirs, personal representative or assignees, to forever fully indemnify, protect, defend and hold Attorney's Title Guaranty Fund, Inc. harmless and to reimburse the fund for all loss, costs, damages suite, attorney fees and expenses of every kind and nature which the Fund may suffer, expand or incur by reason of the issuance of said policy free and clear of the following objections:

- 1. Claims against the estate of Fred Mitchell, the decedent;
2. Illinois State Inheritance Tax and Federal Estate Tax, which any is charged against the estate of said decedent.
3. Legacies, if any, created by the will of said decedent;
4. Rights to contribution

Willie Maie Mitchell by
Angie M. [Signature] her attorney [SEAL]

Subscribed and Sworn to before me this
3rd Day of March, 2007

Notary Public

# UNOFFICIAL COPY

CITY OF CHICAGO

DEPARTMENT OF PUBLIC HEALTH

THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

STATE OF ILLINOIS  
COUNTY OF COOK  
CITY OF CHICAGO

JAN 15 1999

I, **SHIRLEY 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 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 ORDINANCE OF SAID LAWS AND ORDINANCES.**

STATE FILE NUMBER

600797

## MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. **16.10**

REGISTERED NUMBER

DECEASED-NAME <b>Fred Mitchell</b>	FIRST <b>Fred</b>	MIDDLE <b>Mitchell</b>	LAST <b>Mitchell</b>	SEX <b>2. Male</b>	DATE OF DEATH (MONTH, DAY, YEAR) <b>3. January 11, 1999</b>
1. COUNTY OF DEATH <b>COOK</b>	AGE-LAST BIRTHDAY (YRS) MOS. <b>5a. 75</b>	UNDER 1 YEAR <b>5b.</b>	DAYS <b>5c.</b>	HOURS <b>5d.</b>	MIN <b>5e.</b>
4. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER <b>Chicago</b>	HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) <b>Loretto Hospital</b>				
6a. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) <b>Mobile, Ala</b>	MARRIED NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) <b>8a. Married</b>				
7. SOCIAL SECURITY NUMBER <b>420 26 0383</b>	8b. WILLIE MAE BOYD KIND OF BUSINESS OR INDUSTRY <b>11b. Supervisor</b>				
10. RESIDENCE (STREET AND NUMBER) <b>5508 West Quincy</b>	12. EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) <b>12. College (1-4 or 5+)</b>				
13a. STATE <b>Illinois</b>	13b. ZIP CODE <b>60644</b>	13c. INSIDE CITY (YES/NO) YES CITY, TOWN, TWP. OR ROAD DISTRICT NO. <b>Chicago</b>			
14a. RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY) <b>Black</b>	14b. OF HISPANIC ORIGIN? (SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.) <b>X NO</b>				
15. FATHER-NAME FIRST MIDDLE LAST <b>Joseph Michael</b>	14c. SPECIFY: FIRST MIDDLE LAST (MAIDEN) <b>Mable</b>				
16. INFORMANT'S NAME (TYPE OR PRINT) <b>Willie Mae Mitchell</b>	16. RELATIONSHIP <b>17b. Wife</b>				
17a. Mailing Address <b>175508 West Quincy, Chicago, IL</b>	17c. Mailing Address (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) <b>60644</b>				
18. PART I. Immediate Cause (Final disease or condition resulting in death) <b>(a) Possible Pulmonary Embolism</b> <b>(b) Chronic Atrial Insufficiency</b> <b>(c) Myocardial Infarction</b>	18. PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.				
20a. DATE OF OPERATION, IF ANY	20b. MAJOR FINDINGS OF OPERATION				
21a. (1) DID NOT ATTEND THE DECEASED AND LAST SAW HIM/LER ALIVE ON <b>12-10-98</b>	21b. WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) <b>21b. YES</b>				
22a. SIGNATURE <b>Pamela Cruz Carandang MD</b>	22b. DATE SIGNED (MONTH, DAY, YEAR) <b>Jan 13, 1999</b>				
23. NAME AND ADDRESS OF CEMETERY OR CREMATORY-NAME <b>Corbin Colonial Chapel</b>	23. ADDRESS OF CEMETERY OR CREMATORY-NAME <b>5345 West Madison</b>				
24a. BURIAL REMOVAL (SPECIFY)	24b. CITY OR TOWN <b>Hillside, Illinois</b>				
25a. LOCAL REGISTRAR'S SIGNATURE <b>Shirley Lyne</b>	25b. LOCAL REGISTRAR'S SIGNATURE <b>Shirley Lyne</b>				
26a. LOCAL REGISTRAR'S SIGNATURE	26b. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) <b>JAN 15 1999</b>				

# UNOFFICIAL COPY

THE GUARANTEE TITLE & TRUST COMPANY

Commitment Number: A03-3212

## SCHEDULE C PROPERTY DESCRIPTION

The land referred to in this Commitment is described as follows:

LOT 4 IN THE SUBDIVISION OF LOTS 133 AND 152 IN THE SCHOOL TRUSTEES SUBDIVISION OF THE NORTH PART OF SECTION 16, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN # 16-16-106-043-0000

PIN # 16-16-106-044-0000

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