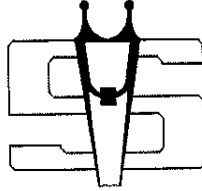


UNOFFICIAL COPY



Sanctity of Contract

Stewart Title Company of Illinois



Doc#: 0411901220
Eugene "Gene" Moore Fee: \$50.00
Cook County Recorder of Deeds
Date: 04/28/2004 02:17 PM Pg: 1 of 3

Prepared by + Return to:

ETHEL ANDERSON
1450 W. 61st St.
Chicago IL 60636

DECEASED JOINT TENANCY AFFIDAVIT

STCI File Number: 374791



STATE OF ILLINOIS)
COUNTY OF COOK)

SS.

Ethel ANDERSON

being duly sworn states that she resides at 1450 W. 61st in the City of Chicago

30
pm

That 2 was acquainted with JAMES H. ANDERSON deceased who, at the time of death, was one of the sworn of the land in County, Illinois, describes as:

see attached

That the deceased died 7/14/1995 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 Will Box of the Probate Division of the Circuit Court of 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 _____ dollars.

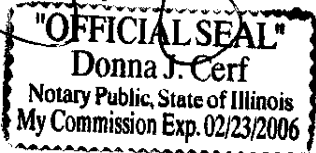
Affiant makes this affidavit for the purpose of inducing Stewart Title Company to issue its Title Insurance Policy., describing the above mentioned property.

Subscribed and sworn to before me by the said

this 16 day of APRIL, A.D. 2004

[Signature]
Notary Public

Ethel C. Anderson
(Affiant's Signature)



REGISTRATION DISTRICT 16.10

MEDICAL EXAMINER'S - CORONER'S CERTIFICATE OF DEATH

613110

1. DECEASED NAME: JAMES H. ANDERSON; LAST: ANDERSON; SEX: M; DATE OF BIRTH: 25 DECEMBER 1926; DATE OF DEATH: JUL 14 1995

2. COUNTY OF DEATH: COOK; CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER: CHICAGO; AGE LAST BIRTHDAY (YRS): 68; HOSPITAL OR OTHER INSTITUTION NAME: JUST. FORENSIC; DATE OF BIRTH (MONTH, DAY, YEAR): 12/25/1926

3. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY): JACKSON, MS.; MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): MARRIED; SOCIAL SECURITY NUMBER: 358-16-5855; USUAL OCCUPATION: POSTMAN; NAME OF SURVIVING SPOUSE (MAIDEN NAME IF WIFE): ETHEL CLEENNA; EDUCATION (SPEL FROM V HIGHEST GRADE COMPLETED): U.S. POST OFFICE; INSIDE CITY (YES/NO): YES; COUNTY: COOK

4. STATE: ILLINOIS; ZIP CODE: 60636; RACE (WHITE, BLACK, AMERICAN INDIAN, BLACK, OTHER): BLACK; FATHER NAME: JAMES ANDERSON; MOTHER NAME: LORE JONES; MAILING ADDRESS: 7515 S DOBSON CHICAGO, IL. 60619

17a. ETHEL C. ANDERSON; 17b. WIFE; 17c. 7515 S DOBSON CHICAGO, IL. 60619; 18. PART I: IMMEDIATE CAUSE (Final disease or condition) resulting in death: ARTERIOSCLEROTIC CARDIOVASCULAR DISEASE; CONDITIONS, IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST: (a) DUE TO OR AS A CONSEQUENCE OF (b) (c)

19. NATURAL, ACCIDENT, HOMICIDE, SUICIDE (UNDETERMINED, SPECIFY): ACCIDENT; DATE OF INJURY (MONTH, DAY, YEAR): JUL 14 1995; HOUR: 14 M; 20a. PLACE OF INJURY (AT HOME, FARM, STREET, FACTORY, OFFICE BUILDING, ETC.) (SPECIFY): HOME; 20b. LOCALITY (CITY, TOWN, OR TWP., OR RD. DIST. NO., COUNTY, STATE): CHICAGO, ILLINOIS; HOW INJURY OCCURRED (ENTER NATURE OF INJURY MENTIONED IN PART II): OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I: NONE

21. I CERTIFY THAT IN MY OPINION BASED UPON MY INVESTIGATION AND THE INQUIRY, THIS DEATH OCCURRED ON THE DATE AT THE PLACE AND DUE TO THE CAUSE(S) STATED, AND THAT: YES [X] NO []

22a. CORONER'S SIGNATURE: DARYL A SIMMS, D.P.; 22b. DATE SIGNED: JUL 15 1995; 22c. DATE SIGNED (MONTH, DAY, YEAR): 7/15/95

23a. BURIAL, CREMATION, REMOVAL (SPECIFY): CREMATION; GEMETERY OR CREMATORY NAME: OAKLAND MEMORY LANES; LOCATION: DOLTON ILLINOIS; CITY OR TOWN: DOLTON; STATE: ILLINOIS; ZIP: 60429

25a. JACKSON FUNERAL HOME 7350 S. COTTAGE GROVE AV. CHICAGO, ILLINOIS 60619; FUNERAL DIRECTOR'S SIGNATURE: [Signature]; FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER: 34-011492

26a. LOCAL REGISTRAR'S SIGNATURE: [Signature]; DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR): JUL 17 1995

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO
JUL 17 1995

I, SHEILA LYNE, RSW, LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS 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 PURSUANCE OF SAID LAWS AND ORDINANCES.


THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

UNOFFICIAL COPY

UNOFFICIAL COPY

SCHEDULE A
ALTA Commitment
File No.: 374791

LEGAL DESCRIPTION



Lot 23 in the Subdivision of the West ½ (except the East 33 feet, the West 33 feet and the South 33 feet thereof) of the Southeast ¼ of the Northwest ¼ of the Southwest ¼ of Section 17, Township 38 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

DIN# 20-17-310-035

Property of Cook County Clerk's Office