No.

UNOFFICIAL COPY

Law Title

Insurance Company, Inc.

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF IL	PROPERTY ADDRESS 8140 South Brandon ave
COUNTY OF COOK	Land Described in Title Commitment / Policy #
address below.	n and under penalty of perjury on oath states that he or she resides at the
That (he) or (she) was acquainted withOnc death, was one of the owners of the land described	ha Escobedo deceased who, at the time of (his or her) in the above Title Commitment and described as:
See legal description in the above refer	enced Title Commitment / Policy and / or
Address of the said land and / or	
Legal description artached or typed belo description.	ow and / or on reverse side hereof for additional or complete legal
That the deceased died July 27, 1999 (D attached hereto.	ate) as evidenced by a certified copy of the death certificate of the deceased
That the deceased died:	
Leaving no Last Will & Testament.	C
Leaving a Last Will & Testament a copy filed with the Clerk of the Probate Divisi	of which is attached hereto. The original of the unproven will is to be on of the Grauit Court of County, Illinois.
Leaving a Last Will & Testament which Court of County, Illino	was filed in the Unproven Will Box of the Probate Division of the Circuit ois, on about(date)
The section of Least NASH & Transfer to which	was probated in the Probate Division of the Circuit Court of
Leaving a Last vviii & Testament Which	, on about as Case #
That from the Estate of the deceased:	(dat 3)
	istate Taxes which were due have been paid and evidence thereof is
attached hereto.	T'
No State Inheritance and /or Federal E	state Taxes were due.
That the total value of the estate of the decindividually or in joint tenancy at the time of the dea	ceased, including both real and personal property owned by the deceased either the of the deceased, does not exceed the sum of
(\$	dc ilars.
Insurance Policy(s), describing the above mer	pose of inducing the Law Title Insurance Company, Inc., to issue a Title ntioned property and / or referenced in the above Title Commitment / Policy ssigns against any false statement(s) willfully made herein.
Cubarrihad and awarn to before me by the sai	d Dated 5-21-00
RICHARD ESCOBE) o Whichard Eschiolo (Seal)
KICHAR) ESCOBE) (name of affiant) this ZI day of, A.D	Affiant's Address:
with /	
(Notary Pablie)	
Refer to: 1300 Iroquois Drive, Suite 200, Naperville, IL 60:	563
Phone: (630) 717-7500 Fax: (630) 717-7538	NOTAR OFFICIAL SEAL® Doc#: 0515105219 Eugene "Gene" Moore Fee: \$50.00

Cook County Recorder of Deeds
Date: 05/31/2005 12:24 PM Pg: 1 of 3

THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

VR200 (Hev. 5/95)

Illinois Department of Public Hoalth-Bivision of Vital Records

26b

DATE FILED BY LOCAL REGISTRAR (MON

1995

ンシング

CITY OR TOWN

OEPARTMENT OF CHICAGO
DEPARTMENT OF PUBLIC HEALTH

SUBJECT

SUBJEC

I, SHEILA 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
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 OF ILLINOIS COUNTY OF CHICAGO

MEDICAL CERTIFICATE OF DEATH MEDICAL CERTIFICATE OF DEATH MARKET RED MEDICAL CERTIFICATE OF DEATH CORCHA AGE-ASS MODGE BECODE O MARKET MODGE BECODE O MARKET BECODE O MARKET BECODE O MARKET MARK		v		0515105219 Page: 2 of 3																							
MIDDLE MIDDLE LAST BECODE 10 MIDDLE LAST BIRTHON MIDDLE LOST BIRTHON MALE COPENITY MALE COPENITY MALE COPING MEETAL MALE COPENITY MALE COPENITY MALE COPENITY MALE COPING MEETAL MALE COPENITY MALE	' '		EOF ATTENDING PHYSICIANTEO	AND ADDRESS OF CERTIFIER	22a. SIGNATURE	TOTHE BEST OF MY KNOWLEDGE, DE	ZO	(PATEO FOPERATION, IF ANY	TATING THE UNDERLYING (c)	1		HATI.	Moss		FIRST	TII i no i e lisi.	8138 S	E (STREET)	CURITY	TSAN ANTON	BIRTHPLACE (MYANDSTATE OF	CITY, TOWN, TWP, OR ROAD DISTRIC			REGISTERED NUMBER	DISTRICT NO.
	ETERYOR CREMATORY-NAME LOCATION CITYOR TOWN STATE DATE	(ITT (DEFENSE)) DEATH! AUSTE BAUSTE	TO E ORW 22d	(ILLINOISLICENSE KUMBER	Conerd provided the provided provided post of 111 4 2 7 1	OCCURRED AT THE TIME, DATE AND PLACE	(MONTH, DAY, YEAR) Y 7 / CDC; WAS CORONER OR MEDICAL HOUR OF DEAT EXAMINER NOTIFIED? (YESNO)		and reporting of minosy	y direct	acute miocardial in far	B) Siwck	omplications that caused the death. Do not enter the mode of dying, such as cardiac or repeating areas, List only one cause on each line.	MAILING ADDRESS (STREET AND NO. OR AF 5 OR 176. 02.20 TO 2 2 O. 176. 02.20 TO 2 2 2 O. 176. 02.20 TO 2 2 2 O. 176. 02.20 TO 2 02 O. 176. 02.20 TO 2 02 O. 176. 02.00 TO 2 02 O. 176. 02	16 DELFINE PAL	DIE LAST MOTHER-MAME FIRST MIDDLE (MAIDEN)	INDUM, ELL, SECIEVA MERICAN: OF HISPANIC ORIGIN? (SPECIFYNOON YES-IF YES, SPEC	13b. Chicago 13c. Yes 13d.	CITY TOWN: TWP OR BOAD DISTRICT NO. 112. 11.	AL OCCUPATION KIND OF BUSINESS OR INDUSTRY EDUCATION (SPECIFY ONLY HIGHEST GR	WILD, NEVER MARHIED. WAS DIVINGED (SPECIFY) WAS PLOT UT ON PLOT	nity Hospital	HOSPITALOR C'THER INS. TITUTION-NAME (IF NOT IN ETHER BY ESTREET AND MARKET	Escobedo 2 Female 5 July 27,	MIDDLE LAST SEX DATEOFDEATH	EDICAL CERTIFICATE OF DEATH	OF ILLINOIS

0515105219 Page: 3 of 3

UNOFFICIAL COP

Law Title Insurance Agency Inc.-Naperville 2900 Ogden Ave., Suite 108 Lisle, Illinois 60532 (630)717-7500

Authorized Agent For: Lawyers Title Insurance Corporation

Commitment Number:

240741L.REV 5/18

SCHEDULE C - PROPERTY DESCRIPTION

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

LOT 32 IN BLOCK 1 IN MEEKER'S ADDITION TO HYDE PARK, SUBDIVISION OF THE SOUTHEAST 1/4 OF THE NORTHEAST 1/4 (EXCEPT THE WEST 25 FEET THEREOF) OF SECTION 31, TOWNSHIP 38 NORTH, RANGE 15, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. h. Dografi

31. 324.037.

ALTA Commitment Schedule C

(240741.PFD/240741L/29)