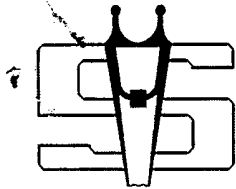


# UNOFFICIAL COPY



0602602143

Doc#: 0602602143 Fee: \$28.00  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 01/26/2006 09:26 AM Pg: 1 of 3



Sanctity of Contract

Stewart Title Company of Illinois

STEWART TITLE OF ILLINOIS  
2 N. LaSalle Street  
Suite 625  
Chicago, IL 60602  
312-849-2243

## DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS  
COUNTY OF COOK

STCI File Number: 464391 114

SS.

Dorothy Ann Cassidy  
being duly sworn states that she resides at 1448 S. PROUNCAV in the City of  
Wenonah, Ill.

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

SEE ATTACHED

3 ✓

That the deceased died JULY 5, 2006, 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 109,000 dollars.

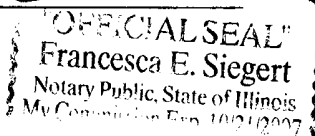
Affiant makes this affidavit for the purpose of inducing Stewart Title Company to issue its Title Insurance Policy., describing the above mentioned property.

Subscribed and sworn to before me by the said

this 5 day of Jan, A.D. 2006

Francesca E. Siegert  
Notary Public

Dorothy Ann Cassidy  
(Affiant's Signature)



I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named at item 1, and that this record was established and filed in my office in accordance with the provisions of the Illinois Vital Records Act.

UNOFFICIAL COPY

DATE JUL 11 2005 SIGNED James E Zelbo

AT JOLIET, ILLINOIS 60433 OFFICIAL TITLE REGISTRAR

The original record of this death is permanently filed with the ILLINOIS DEPARTMENT OF PUBLIC HEALTH at Springfield. County clerks and local registrars are authorized to make certifications from copies of the original record. The Illinois statutes provide that the certification of a death record by the Department of Public Health, local registrar or county clerk shall be prima facie evidence in all courts and places of the facts therein stated.

PRINTED BY AUTHORITY OF THE STATE OF ILLINOIS

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER

MEDICAL CERTIFICATE OF DEATH

STATE OF ILLINOIS STATE FILE NUMBER

DECEASED'S BIRTH NO. REGISTRATION DISTRICT NO. 99.0 REGISTERED NUMBER

Type of Print In Permanent Ink See Funeral Directors Handbook for Instructions

DECEASED-NAME: TIMOTHY FIRST MIDDLE LAST CASSIDY SEX: MALE DATE OF DEATH: JULY 5, 2005

1. COUNTY OF DEATH: WILL CITY/TOWN/TWP OR ROAD/DISTRICT NUMBER: 14440 S. PROVENCAL CH. HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT NTL, GIVE STREET AND NUMBER):

2. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY): CHICAGO MARRIED/NEVER MARRIED/WIDOWED/DIVORCED (SPECIFY): DOROTHY A. MANNING

3. SOCIAL SECURITY NUMBER: 353-16-2216 USUAL OCCUPATION (RET.): ELEVATOR MECH. KIND OF BUSINESS OR INDUSTRY: ELEVATOR

4. RESIDENCE (STREET AND NUMBER): 14440 S. PROVENCAL CH. CITY/TOWN/TWP OR ROAD/DISTRICT NO.: 14440 S. PROVENCAL RD. HOMER GLEN

5. STATE: ILL. ZIP CODE: 60491 RACE: WHITE ETHNICITY: WHITE

6. FATHER-NAME: TIMOTHY M. CASSIDY MOTHER-NAME: ANN BURNS

7. INFORMANT'S NAME (TYPE OR PRINT): DOROTHY CASSIDY RELATIONSHIP: WIFE MAILING ADDRESS: 14440 S. PROVENCAL RD. HOMER GLEN

8. PART I: IMMEDIATE CAUSE (Final disease or condition resulting in death): WEAR AND TEAR OF HEART

9. CONDITIONS, IF ANY, WHICH GIVE RISE TO IMMEDIATE CAUSE, OR STATING THE UNDERLYING CAUSE LAST: DUE TO A CONSEQUENCE OF (a) WEAR AND TEAR OF HEART (b) CORONARY CIRCULATORY DISEASE

10. DATE OF OPERATION: 7/11/05 MAJOR FINDINGS OF OPERATION: HEART HEAVY

11. SIGNATURE OF CERTIFIER: DR. MARK REITER 4400 W. 95TH ST. STE. 307 OAK LAWN, IL. 60453

DISPOSITION: BURIAL CREMATION/REMOVAL (SPECIFY): BURIAL CEMETERY OR CREMATORY-NAME: MT. HOPE CEMETERY LOCATION: CHICAGO, IL. CITY OR TOWN: CHICAGO, IL. STATE: IL. DATE: JULY 9, 2005

DATE: JUL 11 2005

UNOFFICIAL COPY

ALTA COMMITMENT  
Schedule B - Exceptions Cont.  
File Number: TM199967  
Assoc. File No: 464391

STEWART TITLE

GUARANTY COMPANY  
HEREIN CALLED THE COMPANY

COMMITMENT - LEGAL DESCRIPTION

LOT 5 IN BLOCK 18 IN ROBERT BARTLETT'S RESUBDIVISION OF BLOCKS 17 AND 18, IN A.G. BRIGGS AND COMPANY'S PALOS VISTA SUBDIVISION IN THE SOUTHWEST QUARTER OF THE SOUTHEAST QUARTER OF SECTION 24, AND THE WEST HALF OF THE NORTHEAST QUARTER OF SECTION 25, TOWNSHIP 37 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN.

~~ALTA LOAN POLICIES TO BE ISSUED:~~

~~PROPOSED INSURED: WELLS FARGO HOME MORTGAGE~~

~~FIRST MORTGAGE: \$278,976.00~~

~~SECOND MORTGAGE: \$69,744.00~~

Hand to a prepared Bill.  
Gerald S. AMER  
4446 W. 127th  
Palos Hills

Property of Cook County Clerk's Office