

DECEASED JOINT TENANCY AFFIDAVIT

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Doc#: 0527939002 Fee: \$26.50
Eugene "Gene" Moore
Cook County Recorder of Deeds
Date: 10/06/2005 11:59 AM Pg: 1 of 2

JOAN O. MC CARTHY, hereinafter referred to as affiant, states under oath that the affiant resides at 1451 Suffolk Avenue, Westchester, Illinois 60154; that the affiant was acquainted with JOHN P. MC CARTHY, the decedent; that at the time of death, the decedent was one of the owners of the property, by virtue of a properly recorded joint tenancy warranty deed, said property located as hereinafter described:



Doc#: 0704731044 Fee: \$26.00
Eugene "Gene" Moore
Cook County Recorder of Deeds
Date: 02/16/2007 12:01 PM Pg: 1 of 2

(The Above Space For Recorder's Use Only)

LOT 271 IN GEORGE NIXON AND COMPANY'S SECOND TERMINAL ADDITION TO WESTCHESTER IN THE NORTH HALF OF SECTION 21, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, COMMONLY KNOWN AS 1451 SUFFOLK AVENUE, WESTCHESTER, ILLINOIS.

Permanent Index Number (PIN): 15-21-209-011-0000

Address(es) of Real Estate: 1451 Suffolk Avenue, Westchester, Illinois 60154

That the decedent had 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 life interest therein or the creation of interests to take effect in possession or enjoyment after death;

That the decedent died on April 1, 2005 leaving no last will and testament,

That the total value of decedent's estate, including the taxable interest in the above property, was \$350,000 and that the value of the above property individually was \$200,000.

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

TRANSFER STAMP
CERTIFICATION OF COMPLIANCE
Village of Westchester
C.A. Hillman 10/14/05

Joan O. McCarthy
AFFIANT

SUBSCRIBED AND SWORN TO
before me this 4th day of August, 2005.

THIS INSTRUMENT WAS PREPARED BY:
John G. Mulroe
Attorney at Law
6687 North Northwest Highway
Chicago, Illinois 60631

Carol A. Mulroe
NOTARY PUBLIC



*re-recorded to correct legal description



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DECEDENT'S BIRTH NO.		REGISTRATION DISTRICT NO. <u>16-92</u>		STATE OF ILLINOIS				STATE FILE NUMBER		
		REGISTERED NUMBER <u>423</u>		MEDICAL CERTIFICATE OF DEATH						
Type or Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS		DECEASED-NAME FIRST MIDDLE LAST			SEX	DATE OF DEATH (MONTH, DAY, YEAR)				
A		1. <u>JOHN P MCCARTHY</u>			2. <u>Male</u>	3. <u>APRIL 1, 2005</u>				
B		4. COUNTY OF DEATH <u>COOK</u>		AGE-LAST BIRTHDAY (YRS) 5a. <u>75</u>	UNDER 1 YEAR 5b. <u>75</u>	UNDER 1 DAY 5c. <u>75</u>	DATE OF BIRTH (MONTH, DAY, YEAR) 5d. <u>August 7, 1929</u>			
C		6a. <u>PROVISO TOWNSHIP</u>		6b. <u>FOSTER G. MCGAW HOSPITAL</u>			8c. <u>Inpatient</u>			
D		7. <u>Chicago, IL.</u>		8a. <u>Married</u>		8b. <u>Joan Ogden</u>		9. <u>Yes</u>		
E		10. SOCIAL SECURITY NUMBER <u>354 22 1991</u>		11a. <u>Buyer</u>		11b. <u>Retail</u>		12. <u>4</u>		
		13a. RESIDENCE (STREET AND NUMBER) <u>145 Suffolk</u>		13b. CITY, TOWN, TWP. OR ROAD DISTRICT NO. <u>Westchester</u>		13c. <u>Yes</u>		13d. <u>Cook</u>		
		13e. STATE <u>Illinois</u>		13f. ZIP CODE <u>60154</u>		14a. <u>White</u>		14b. <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES SPECIFY:		
PARENTS		15. FATHER-NAME FIRST MIDDLE LAST <u>Paul McCarthy</u>			16. MOTHER-NAME FIRST MIDDLE LAST (MAIDEN) LAST <u>Jeannette Cooper</u>					
		17a. <u>DALJIT MANI</u>		17b. <u>HOSPITAL RECORDS</u>		17c. <u>2160 SOUTH FIRST AVENUE MAYWOOD, ILLINOIS 60153</u>				
CAUSE		18. PART I. Enter the disease, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line.							APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
		Immediate Cause (Final disease or condition resulting in death)		(a) <u>Cerebral Vascular Accident</u>						
		CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.		(b) <u>DUE TO, OR AS A CONSEQUENCE OF</u>						
				(c) <u>DUE TO, OR AS A CONSEQUENCE OF</u>						
		PART II. <u>Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.</u>							19a. <u>NO</u>	
		20a. DATE OF OPERATION, IF ANY		20b. MAJOR FINDINGS OF OPERATION			20c. IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? <u>NO</u>			
		21a. <u>04/01/05</u>		21b. <u>NO</u>			21c. <u>11:30 P.M.</u>			
CERTIFIER		22a. SIGNATURE <u>Elizabeth Mlynarczyk</u>		22b. <u>2160 SOUTH FIRST AVENUE MAYWOOD, ILLINOIS 60153</u>			22c. <u>4/2/05</u>			
		22d. <u>Elizabeth Mlynarczyk</u>		22e. <u>2160 SOUTH FIRST AVENUE MAYWOOD, ILLINOIS 60153</u>			22f. <u>125-047975</u>			
DISPOSITION		23. BURIAL, CREMATION, REMOVAL (SPECIFY) <u>Burial</u>		24b. <u>Queen of Heaven</u>		24c. <u>Hillside, Illinois</u>		24d. <u>April 6, 2005</u>		
		25a. <u>Conboy-Westchester; 10501 Cermak Rd.; Westchester, Illinois 60154</u>		25b. <u>Michael A. McDermott</u>			25c. <u>039-10279</u>		25d. <u>April 4, 2005</u>	

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.

DATE APR 04 2005 SIGNED Michael A. McDermott
AT BROADVIEW, ILLINOIS Illinois OFFICIAL TITLE LOCAL REGISTRAR OF VITAL STATISTICS

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 of the facts therein stated.