

UNOFFICIAL COPY



Doc#: 0719044048 Fee: \$28.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 07/09/2007 12:13 PM Pg: 1 of 3

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS

COUNTY OF

MARVIN LYNETH

sworn states that

I

resides at

7923 S CHANDLER

in the City of

CHICAGO 60617

That I was acquainted

JAMES D GLADNEY

deceased who, at the time of

HIS

death, was one of the owners of the land in

COOK

County, Illinois, described as:

P.I.N.

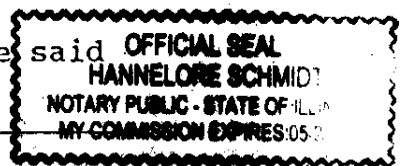
20-25-426-823-0000

That the deceased died

6-18-07

as evidenced by a certified copy of death certificate of the deceased attached hereto.

Subscribed and sworn to before me by the



this

9th

day of

JULY

A.D. 2007

Hannelore Schmidt

Notary Public

[Signature]
(affiant signature)

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11

0000
THE SOUTH 30 FEET OF LOT 5 IN BLOCK 2 IN THE SUBDIVISION OF BLOCK 8 IN
CAROLIN'S SUBDIVISION OF THE WEST 1/2 OF THE SOUTH EAST 1/4 OF SECTION 25,
TOWNSHIP 38 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN
COOK COUNTY, ILLINOIS

PROPERTY INDEX NUMBER: 20-25-426-023-0000

Property of Cook County Clerk's Office

MEDICAL CERTIFICATE OF DEATH

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

JUL 03 2007

REGISTRATION DISTRICT NO. **16-10**
REGISTERED NUMBER

608846

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

DECEASED-NAME **JAMES Gladney** SEX **Male** DATE OF DEATH (MONTH, DAY, YEAR) **June 18, 2007**

1. COUNTY OF DEATH **Cook** AGE-LAST BIRTHDAY (YRS) **58.94** UNDER 1 YEAR MOS. UNDER 1 DAY HOURS MIN. DATE OF BIRTH (MONTH, DAY, YEAR) **December 08, 1912**

4. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER **Chicago** HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN OTHER, GIVE STREET AND NUMBER) **St. Bernard Hospital** IF HOSP OR INST. INDICATE D.O.A. (PREVIOUS) **Indefinite**

6a. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) **Chicago** 6b. NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) **None** 9. WAS DECEASED SERVING IN U.S. ARMED FORCES? (YES/NO) **Yes**

7. Louisville, MS 8a. Widowed 8b. NONE 10. SOCIAL SECURITY NUMBER **426-50-4073** 11a. Maintenance 11b. Railroad 12. EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) **Elementary/Secondary (8-12)** College (1-4 of 5 +) **9**

13. STATE **IL** 13a. 7923 S. Clyde 13b. Chicago 13c. Cook 14. OF HISPANIC ORIGIN? (SPECIFY IN OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PORTUGUESE, ETC.) **Yes**

15. FATHER-NAME **Field Gladney** 16. MOTHER-NAME **Ola Welch** 17. RECORDS **Records** 17c. 326 West 64th St. Chicago, IL 60621

18. PART I. IMMEDIATE CAUSE (FINAL DISEASE OR CONDITION RESULTING IN DEATH) **Pneumonia** 19. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

20. CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (A) **Due to or as a consequence of Congenital Heart Failure** (B) **Due to or as a consequence of** (C) **Due to or as a consequence of**

21. DATE OF OPERATION, IF ANY **20b.** MAJOR FINDINGS OF OPERATION

22. SIGNATURE **Dr. Dante Pimentel** (TYPE OR PRINT)

23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER **Dr. Dante Pimentel** (TYPE OR PRINT)

24a. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) **Chicago** 24b. NAME **Elmhurst, IL** 24c. CITY OR TOWN **Elmhurst, IL** 24d. STATE **IL** 24e. ZIP **60129**

25a. LOCAL REGISTRAR'S SIGNATURE **John S. Mason, M.D.** 25b. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) **JUL 03 2007**

26. THIS CERTIFICATE COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

27. I, JERRY MASON M.D., LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILL BIRTHS 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 LAW AND ORDINANCES.

28. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

29. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

30. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH



DEPARTMENT OF PUBLIC HEALTH
CITY OF CHICAGO
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AFFIXED.