

UNOFFICIAL COPY



Doc#: 0719002254 Fee: \$28.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 07/09/2007 10:16 AM Pg: 1 of 3

Property of Cook County Clerk's Office
RECORDING COVER SHEET

TYPE OF DOCUMENT: Deceased Joint Tenancy Affidavit

PIN # 20-31-216-060

O'CONNOR TITLE SERVICES # 7187-0044

Property: 8107 South Damen Avenue, Chicago, Illinois 60620 **County:** Cook

Legal Description: The North 15 feet of Lot 45 and Lot 46 (except the North 10 feet thereof) in Block 12 in Baird and Rowland's Subdivision of the West half of the Northeast quarter of Section 31, Township 38 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

Permanent Index Number(s): 20-31-216-060

Cook County Clerk's Office
7/9/07

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DECEASED JOINT TENANCY AFFIDAVIT

State of Illinois)

SS.

County of Cook)

DECEASED JOINT TENANCY AFFIDAVIT

Yvonne Blair, hereinafter called Affiant(s) being duly sworn states that she resides at 8107 S. Damen Avenue, Chicago, IL 60620. That she was acquainted with *Theardis C. Blair*, hereinafter referred to as Deceased, and at the time of his death, was one of the owners of the land in Cook County, Illinois, described as:

The North 15 feet of Lot 45 and Lot 46 (except the North 10 feet thereof) in Block 12 in Baird and Rowland's Subdivision of the West half of the Northeast quarter of Section 31, Township 38 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois

That the deceased died March 14, 1995 as evidenced by a certified copy of Deceased's death certificate attached hereto.

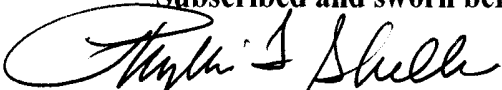
That the deceased died:

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 Cook County, Illinois.
 Leaving a Last Will & Testament, which was filed, in the Unproven Will Box of the Probate Division of the Circuit Court of _____.

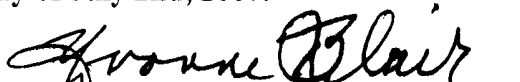
That the total value of the estate of the Deceased, for estate tax purposes, including both real and personal property owned by the Deceased either individually or in Joint Tenancy at the time of the death of the Deceased, does not exceed the sum of \$10.00 dollars.

Affiant makes this affidavit for the purpose of inducing the Real Estate Index to issue its Title Insurance Policy describing the above-mentioned property.

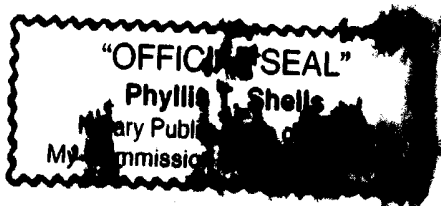
Subscribed and sworn before me this day of July 2nd, 2007.



 Notary Public



 Yvonne Blair



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STATE FILE NUMBER

MEDICAL CERTIFICATE OF DEATH

UNIQUE NUMBER: 16:55
 REGISTERED NUMBER: 238

DECEASED-NAME THEARDIS C. BLAIR		SEX 2 MALE		DATE OF DEATH (MONTH, DAY, YEAR) 3. MARCH 14, 1995	
COUNTY OF DEATH 4. COOK		DATE OF BIRTH (MONTH, DAY, YEAR) 5d. JUNE 24, 1941		IF HOSP. OR INST. INDICATE D.O.A. OR FEMER. OR INPATIENT (SPECIFY) 6c. EMER. RM.	
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER 6a. EVERGREEN		HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT MOTHER, GIVE STREET AND NUMBER) 6b. LITTLE CO. OF MARY HOSPITAL		WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO) 9. NO	
BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) 7. HOUSTON, TX.		NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) 8b. YVONNE CONDA		EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) 12. College (1-4 or 5+)	
SOCIAL SECURITY NUMBER 10. 216-36-1022		KIND OF BUSINESS OR INDUSTRY 11a. DRIVER		INSIDE CITY (YES/NO) 13c. YES	
RESIDENCE (STREET AND NUMBER) 13a. 8107 S. DAMEN		CITY, TOWN, TWP. OR ROAD DISTRICT NO. 13b. CHICAGO		COUNTY 13d. COOK	
STATE 13e. ILLINOIS		RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY) 14a. BLACK		OFF H.S.P.A. OR ORIGIN? (SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.) 14b. X NO	
FATHER-NAME FIRST MIDDLE LAST 15. DAVID BLAIR		MOTHER-NAME FIRST MIDDLE 16. RUBY JOHNSON		RELATIONSHIP 17. WIFE	
INFORMANT'S NAME (TYPE OR PRINT) 17a. YVONNE BLAIR		MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) 17c. 8107 S. DAMEN CHGO, IL. 60620		MARRIAGE INTERVAL BETWEEN DEATHS (MONTHS) 19b. NO	
18. PART I. Enter the diseases, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, stroke, or heart failure. List only one cause on each line. (a) CONGESTIVE HEART FAILURE (b) Cerebro Myopathy (c) DIABETES MELLITUS		IMMEDIATE CAUSE (Final disease or condition resulting in death) (a) CONGESTIVE HEART FAILURE (b) Cerebro Myopathy (c) DIABETES MELLITUS		WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) 21b. YES	
PART II. Other significant conditions contributing to or affecting the underlying cause given in PART I. DIABETES MELLITUS		DATE OF OPERATION, IF ANY 20b.		WAS AUTOPSY PERFORMED PRIOR TO COMPLETION OF CAUSE OF DEATH (YES/NO) 19a. NO	
20a. (1) DID (NOT) ATTEND THE DEATH AND LAST SAW HIM/HER ALIVE? 21a.		21a. (2) TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED. 22b. SIGNATURE: Bayanueety Gladole 22c. NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT): BARUSHETTY MADOOPI, CHGO, IL. 60620		DATE SIGNED (MONTH, DAY, YEAR) 21c. 7:35 P. M. 22b. 031695 22d. 036057250	
23. NAME OF TYPING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)		24b. OAKWOOD CEM.		DATE OF DEATH (MONTH, DAY, YEAR) 24d. 3-18-95	
24a. BURIAL FUNERAL HOME		24c. CHICAGO		STATE 24e. IL	
25a. GATLING'S CHAPEL		25b. A. J. J. J.		CITY OR TOWN 25c. CHICAGO	
25b. A. J. J. J.		25c. CHICAGO		STATE 25d. IL	
25c. CHICAGO		25d. IL		CITY OR TOWN 25e. CHICAGO	
25d. IL		25e. CHICAGO		STATE 25f. IL	
25e. CHICAGO		25f. IL		CITY OR TOWN 25g. CHICAGO	
25f. IL		25g. CHICAGO		STATE 25h. IL	
25g. CHICAGO		25h. IL		CITY OR TOWN 25i. CHICAGO	
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25o. CHICAGO		25p. IL		CITY OR TOWN 25q. CHICAGO	
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25q. CHICAGO		25r. IL		CITY OR TOWN 25s. CHICAGO	
25r. IL		25s. CHICAGO		STATE 25t. IL	
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25u. CHICAGO		25v. IL		CITY OR TOWN 25w. CHICAGO	
25v. IL		25w. CHICAGO		STATE 25x. IL	
25w. CHICAGO		25x. IL		CITY OR TOWN 25y. CHICAGO	
25x. IL		25y. CHICAGO		STATE 25z. IL	
25y. CHICAGO		25z. IL		CITY OR TOWN 26a. CHICAGO	
25z. IL		26a. CHICAGO		STATE 26b. IL	
26a. CHICAGO		26b. IL		CITY OR TOWN 26c. CHICAGO	
26b. IL		26c. CHICAGO		STATE 26d. IL	
26c. CHICAGO		26d. IL		CITY OR TOWN 26e. CHICAGO	
26d. IL		26e. CHICAGO		STATE 26f. IL	
26e. CHICAGO		26f. IL		CITY OR TOWN 26g. CHICAGO	
26f. IL		26g. CHICAGO		STATE 26h. IL	
26g. CHICAGO		26h. IL		CITY OR TOWN 26i. CHICAGO	
26h. IL		26i. CHICAGO		STATE 26j. IL	
26i. CHICAGO		26j. IL		CITY OR TOWN 26k. CHICAGO	
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26k. CHICAGO		26l. IL		CITY OR TOWN 26m. CHICAGO	
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26o. CHICAGO		26p. IL		CITY OR TOWN 26q. CHICAGO	
26p. IL		26q. CHICAGO		STATE 26r. IL	
26q. CHICAGO		26r. IL		CITY OR TOWN 26s. CHICAGO	
26r. IL		26s. CHICAGO		STATE 26t. IL	
26s. CHICAGO		26t. IL		CITY OR TOWN 26u. CHICAGO	
26t. IL		26u. CHICAGO		STATE 26v. IL	
26u. CHICAGO		26v. IL		CITY OR TOWN 26w. CHICAGO	
26v. IL		26w. CHICAGO		STATE 26x. IL	
26w. CHICAGO		26x. IL		CITY OR TOWN 26y. CHICAGO	
26x. IL		26y. CHICAGO		STATE 26z. IL	
26y. CHICAGO		26z. IL		CITY OR TOWN 27a. CHICAGO	
26z. IL		27a. CHICAGO		STATE 27b. IL	
27a. CHICAGO		27b. IL		CITY OR TOWN 27c. CHICAGO	
27b. IL		27c. CHICAGO		STATE 27d. IL	
27c. CHICAGO		27d. IL		CITY OR TOWN 27e. CHICAGO	
27d. IL		27e. CHICAGO		STATE 27f. IL	
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27g. CHICAGO		27h. IL		CITY OR TOWN 27i. CHICAGO	
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27i. CHICAGO		27j. IL		CITY OR TOWN 27k. CHICAGO	
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27x. IL		27y. CHICAGO		STATE 27z. IL	
27y. CHICAGO		27z. IL		CITY OR TOWN 28a. CHICAGO	
27z. IL		28a. CHICAGO		STATE 28b. IL	
28a. CHICAGO		28b. IL		CITY OR TOWN 28c. CHICAGO	
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28x. IL		28y. CHICAGO		STATE 28z. IL	
28y. CHICAGO		28z. IL		CITY OR TOWN 29a. CHICAGO	
28z. IL		29a. CHICAGO		STATE 29b. IL	
29a. CHICAGO		29b. IL		CITY OR TOWN 29c. CHICAGO	
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29y. CHICAGO		29z. IL		CITY OR TOWN 30a. CHICAGO	
29z. IL		30a. CHICAGO		STATE 30b. IL	
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30x. IL		30y. CHICAGO		STATE 30z. IL	
30y. CHICAGO		30z. IL		CITY OR TOWN 31a. CHICAGO	
30z. IL		31a. CHICAGO		STATE 31b. IL	
31a. CHICAGO		31b. IL		CITY OR TOWN 31c. CHICAGO	
31b. IL		31c. CHICAGO		STATE 31d. IL	
31c. CHICAGO		31d. IL		CITY OR TOWN 31e. CHICAGO	
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31m. CHICAGO		31n. IL		CITY OR TOWN 31o. CHICAGO	