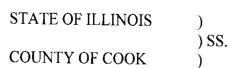
UNOFFICIAL CC

DECEASED JOINT TENANCY **AFFIDAVIT**





Doc#: 0728949007 Fee: \$26.50 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 10/16/2007 08:59 AM Pg: 1 of 2

Audrey J. DeLaBruere being duly sworn states that she resides at 201 N. Yale, in the Village of Arlington Heights, Stree of Illinois.

That she was married to Ernest R. DeLaBruere, deceased, who, at the time of his death, was one of the owners in the land in Cook County, Illinois, described as:

Vacated Miner Street (except the South 6 feet thereof) lying South of and adjoining lot 26 in Block 4 in Reuter's Westgate Unit Number 1 a Subdivision of part of the South West quarter of Section 30, Township 42 North, Range 11 East of the Principal Meridian, in Cook County, Illinois.

Permanent Real Estate Index Number: 03-30-312-028-0000

Address of Real Estate: 201 N. Yale, Arlington Heights, Illinois 60005

That the deceased died Argut 10, 2007, is evidenced by a certified copy of death certificate of the deceased attached hereto. 12 C/6

That the deceased died:

- Leaving no Last Will and Testament.
- Leaving a Last Will and Testament. The original of the upproven will should be [] filed with the Clerk of the Probated Division of the Circuit Court of * County, Illinois.
- Leaving a Last Will and Testament which was filed in the Unprover Will Box of [X]the Probate Division of the Circuit Court of Cook County, Illinois, about September, 2007.

Subscribed and Sworn to before me this 27th day of September, 2007.

Notary Public

OFFICIAL SEAL THOMAS W KIVLAHAN NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:07/19/08

0728949007 Page: 2 of 2

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STATE OF ILLINOIS)
County of Cook)

DAVID ORR, County Clerk

AUG 1.0 2007

I, David Orr, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.

IN WITNESS THEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the city of Chicago, in said County.

COUNTY CLERK

DECEDENT'S BIRTH NO.	REGISTRATION DISTRICT NO.	16.0	STATE OF ILLINOIS			STATE FILE	
	REGISTEP_D NUMBER		MEDICAL C	ERTIFICA	TE OF D	EATH	NUMBER
Type or Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS A	1. Ernest COUNTY OF DEATH 4. COOK CITY, TOWN, TWP, OR ROA 6a. Arlington I BIRTHPLACE (CITY AND STA FOREIGR COUNTRY)	leights,	DeLaBruere 2. Male			OP/EMER. RM, INPATIENT (SPECIFY)	
B	7Groveton NH SOCIAL SECURITY NUMBE 10. 002 22 083 RESIDENCE (STREET AND IN 13a. 201 North	R USUAL (4 11aEd JMBER) 1 Yale	larried DOCCUPATION HUCATOR JOINTY 3b.	8b. Audr KIND OF BUSINESS 11b. Grade TOWN, TWP, OR ROA Arlingto	ey Davis ORINDUSTRY School 12. D DISTRICT NO. n Heights	CATION (SPECIFYON): intary/Secondary (0-12) 12 INSIDECITY (YES-NO) Yes 13c.	ARMED FORCES? (YES/NO 9. Yes YHIGHEST GRADE COMPLETED) College (1-4 or 5+) 5+ COUNTY COOK
PARENTS	13e. Illinois FATHER-NAME FIRS 15. Lucien INFORMANT'S NAME (TYPE	D		14b. MOTHE	□ NO □ YES R-NAME FIRST Alice MAILING ADDRESS (STE	YNOORYES-IFYES, SPEC SPECIFY: MIDDLE (Costai	OFYCUBAN MEXICAN, PUERTORICAN, etc.) (MAIDEN) LAST n) DeLaBruere iTYORTOWN, STATE, ZIP)
2 3 CAUSE	18. PART I. Immediate Cause (Final disease or condition resulting in death) CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYIN	(a) (b)	or complications that caused in re. List only one cause on a large list one cause of large	hadada O a a a a	Tro. 201 No	rth Yale A	rlington Hts II1 APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH WO THE
5 N	CAUSE LAST. PART II. Other significant condition DATE OF OPERATION, IF AN 202. (DID) (DID NOT) ATTEND TH	Y MAJOR F	I but not resulting in the underlying of	ause given in PART I.		20c.	E, WAS THERE A PREGNANCY IN PAST
CERTIFIER -	AND TAST SAW MINHER ALI 21a. TO THE BEST OF MY KNOWL 22a. SIGNATURE NAME AND ADDRESS OF CE 22c. STENDING PHYSI NAME OF ATTENDING PHYSI	EDGE DEATH OCC	URRED AT THE TIME DATE ORPRINT)	3245	WAS CORONER EXAMINER NOTI 21b. NO OTHE CAUSE(S) STAT	21c. DATE	9:20 a M. SIGNED (MONTH)DAY, YEAR) SISLICENSE NUMBER 360346
DISPOSITION	23. BURIAL CREMATION, REMOVAL (SPECIFY) 24a. <u>Crematio</u> FUNERAL HOME	CEMETERYOR 1 24b. Lak. NAME UNETAL HO	ewood Cremato street and me 3615 Kirch	LOCATION 24c. I	78 C DA	STATE STATE III IN S OWS IIII INCREAL DIRECTOR'S ILLIN 50. 034 ITEFILEDBY LOCAL REGIL	
Vi	R200 (Řev. 5/89)		Illinois Department of Public	Health-Division of Vital			ON 1989 U.S. STANDARD CERTIFICATE)