UNOFFICIAL COPY DECEASED JOINT TENANCY

AFFIDAVIT	ļ	
STATE OF ILLINOIS)	
COUNTY OF COOK) ss.)	2731047089
AUDREY HALLORAN, a widow, being duly sworn states that she resides at 5038 West Hutchinson Street, Chicago, Illinois 60641.		Doc#: 0731047089 Fee: \$26.00 Eugene "Gene" Moore RHSP Fee: \$10.00 Cook County Recorder of Deeds Date: 11/06/2007 10:37 AM Pg: 1 of 2
That she was ac with ROGER HALLOR/N who at the time of his do one of the owners of the	deceased, eath, was	Above Space for Recorder's Use Only
Cook County, Illinois, des		
LOT 16 IN BLOCK 3 IN	SCHROEDERS	SUBDIVISION OF THE NORTH 1/2 OF LOT 10 IN SCHOOL TRUSTEES P 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN
Permanent Real Estate Ind	lex Number: 1	3-16-408 022-0000
Address of Real Estate: 5	038 West Hutc	hinson Street, Chicago, Illinois 60641
That the deceased deceased attached hereto.	died November	, as evidenced by a certified copy of death certificate of the
That the deceased of	lied:	C/o.
	Last Will & Te	2
Leaving a I will should County, Illin	be filed with	the Clerk of the Probate Division of the Circuit Court of
Leaving a Division of	Last Will & T the Circuit Cou	Testament which was filed in the Unproven Will Box of the Probate art of County, Illinois, about
That the total value deceased either individually dollars	y or in joint ten	of the deceased, including both real and personal property owned by the ancy at the time of the death of the deceased, does not exceed the sum of
Subscribed and swomen being August 1900 March 1900 Marc	addamee }	Midra Lollman
Notary Public	LODANI 5029 V	AUDREY HAYLORAN, Affiant
CLIONNIO, AUDREY HALI	JUKAN, DUSS V	Vest Hutchinson Street/Chicago, Illinois 60641

PERMANENT INK
See Funeral Directors.
Hospital, or Physicians
Handbook for
INSTRUCTIONS 000 CENTIFIER COMDITIONS, IT TO WHICH GIVE RISE TO WOLKE CAUSE (8) STATE OF BIRTHUE NOT REGISTRATION DISTRICT NO. PART RESIDENCE STREET AND NUMBER SOCIAL SECURITY NUMBER ECEASED-NAME REGISTERED TO THE BEST OF MY KNOWLEDGE. INFORMANT NAME (TYPE OR PRINT) BURIAL CREMATION, REMOVAL ISPECIFY NAME OF ATTENDING PHYSICIAN IF LIHER THAN CERTIFIER (TYPE ON PRINT) 228 SIGNATURE AND LAST SAW HIM/HER ACIVE ON DATE OF OPERATION, IF ANY PART II. OTHER SIGNIFICANT CONDITIONS: COMPITIONS CONTRIBUTING 250 AUISCALCO LYING CAUSE LAST. FUNERAL DIRECTOR'S SIGNATURE CAL REGIZ UNERAL HOME 21-30-0541 R 200 Chicago TOWH, TWP. OR ROAD DISTRICT NUMBER 5038 W. さいたいか Illinois White REV. 5/82 レででですご Philip Bonom. DEATH WAS CAUSED BY: Roger Hutchingson 6.1 DRIGIN OR DESCENT 5 3 DUE TO OR AS A CONSEQUENCE OF TANE COOL CEMETERY OF CREMATORY—NAME É USUAL OCCUPATION CITIZEN OF WHAT MAJOR FINDINGS OF OPERATION Kidney Carcinoma 古いしいこの 下のつのでる AS A CONSEQUENCE OF U.S.A Ilinois Department of Public Health - Office of Vital Records 1753 ACTING LOCAL REGISTRAR MEDICAL BIRTHOLP THE し、でのことがい CITY, TOWN, TWP. OR ROAD DISTRICT NO. STREET AND NUMBER OR R. F. D. ξ. HOSPITATOR OTHER INSTITUTION-YOME IT NOT UM SERTER, GIVE Rush TIME, DATE AND Congress Pkwy WONTH DAY, YEAR) Chieggo 1983 HUBER | STAR HUBER ! DAY DATE OF BIRTHIMO., DAY, YEAR) CERTIFICATE ENTER ONLY ONE CAUSE PER LIME OR (1), (b), AND (c) Presbyterian St. RELATIONSHI MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) KIND OF BUSINESS OR INDUSTRY Clerk 12000 CO Tendeax TATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (4) , 2111 W. FRINGE MEK RICHIGAGO, III. 606-18 イプアカカーのゼ THE THE PRICE STATES LOCATION E AND DO MOTHER MAIDEN NAME Chg. MAILING ADD. ESS HES/NO SPECIFY YES OR NO! NO E TO THE CAUSE(S) STATED よのですべい 1753 W. SO OF Ħ 8 Lukes No 3 220, 1938 60612 NOTE: 15 AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED. DEATH NAME OF SURVIVING SPOURE (MAIDEN NAME, IF WIFE) COUNTY (SPECIFY YES OR NO. . WAS DECEASED BY HIN Congress Pkwy Chg. ĕ FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER (STREET AND NO. OR R. F D., CITY OR TOWN (BASED ON 1978 U.S. STANBARD CERTIFICATE) Center HOUR OF DEATH November AUTOPS) 200 REMALE, WAS THERE A PREG-NANCY IN PAST THREE MONTHS? 22b November 28. DATE SIGNED IMO., DAY, YR. てできし 2 (Q) YES O I.S. WAR OR DATES OF SERVICE ILLINOIS LICENSE NUMBER 22d36-52056 ğ COUNTY OP/ ET CR MM. INPATIENT w. Imatient おんといういって 1983 0001,1983 53A " BETWEEN ONSET AND DEATH P 200 č Illinois どっとの Cook (MONTH, DAY, YEAR) KAK (HON month STATE, 21P 1983 21909 County Clerk

county of Cook, at my office in the City o

IN WITNESS WHEREOF, I have hereunto set my office in the Chicago, in said County.

I, STANLEY T. KUSPER, JR., County Clerk of the County of Cobk, in the State aforesaid, and Keeper of the Records and Files of said County, do hereby certify that the attached is a true and coirect copy of the original Record on file, all of which appears from the equals and files in my office.

STATE OF ILLINOIS, Cook,

1985