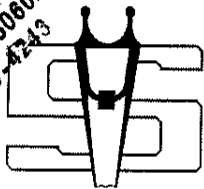


UNOFFICIAL COPY

STEWART TITLE OF ILLINOIS
2 N. LaSalle Street
Suite 825
Chicago, IL 60602
312-848-4243

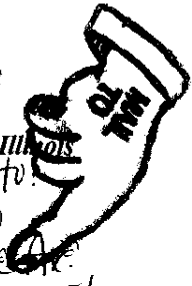


Sanctity of Contract



Doc#: 0805760039 Fee: \$28.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 02/26/2008 11:44 AM Pg: 1 of 3

Stewart Title Company of Illinois
PREPARED BY RETURN TO:
MARIA SERRATO
3244 W. PIERCE
CHICAGO, IL 60651



DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF COOK

SS.

STCI File Number: 554999

20A3

MARIA SERRATO
being duly sworn states that she resides at 3244 W. PIERCE in the City of CHICAGO, IL 60651

That she was acquainted with RAFAEL SERRATO deceased who, at the time of death, was one of the sworn of the land in COOK County, Illinois, describes as:

SEE ATTACHED LEGAL DESCRIP.

That the deceased died 02/19/05, as evidenced by a certified copy of death certificate of the deceased 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 _____ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of _____ County, Illinois about _____.

That the total value of the estate of the deceased, 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 0 dollars.

Affiant makes this affidavit for the purpose of inducing Stewart Title Company to issue its Title Insurance Policy., describing the above mentioned property.

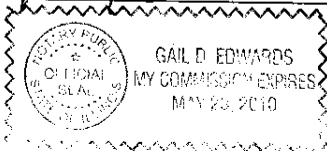
Subscribed and sworn to before me by the said

this 14th day of February, A.D. 2008

Gail D. Edwards
Notary Public

Maria Serrato
(Affiant's Signature)

LC



REGISTRATION DISTRICT NO. REGISTERED NUMBER 16.10

MEDICAL CERTIFICATE OF DEATH

STATE OF ILLINOIS

STATE FILE NUMBER 602676

DECEASED-NAME: RAFAEL FIRST MIDDLE LAST SEX DATE OF DEATH (MONTH, DAY, YEAR) 2 Male 3 Feb. 19, 2005

CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER: Cook COUNTY OF DEATH: Chicago HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT NETHER, GIVE STREET AND NUMBER): Rush University Medical Center

BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY): Mexico MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): 8a Married NAME OF SURVIVING SPOUSE (MARRIAGE NAME, IF WIFE): Maria Villarreal

SOCIAL SECURITY NUMBER: [REDACTED] USUAL OCCUPATION: 11a Electrician KIND OF BUSINESS OR INDUSTRY: 11b Construction EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED): 12 Elementary/Secondary (9-12) INSIDE CITY (YES/NO): 13c YES COUNTY: 13d Cook

RESIDENCE (STREET AND NUMBER): 8510 N. MONTICELLO ILLINOIS 131 ZIP CODE: 60076 RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY): 14a WHITE

FATHER-NAME: ATANACIO SERRATO MOTHER-NAME: MARIA GUADALUPE MARUMBE RELATIONSHIP: 17b Spouse MAKING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP): 17c 3244 W. Pierce, Chicago, IL

INFORMANT'S NAME (TYPE OR PRINT): Maria Serrato

PART I. Enter the disease, or complications that caused the death. Do not enter the mode of dying, such as cardiac, stroke, or heart failure. List only one cause on each line. (a) ISCHEMIC CARDIOMYOPATHY (b) CORONARY ARTERY DISEASE (c) DUE TO OR AS A CONSEQUENCE OF

PART II. Enter significant conditions contributing to death but not resulting in the underlying cause given in Part I. HYPOTENSIVE FAILURE

DATE OF OPERATION, IF ANY: 200. MAJOR FINDINGS OF OPERATION: FEB. 18, 2005

21a. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE STATED. WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) 21b. HOUR OF DEATH: 7:50 P

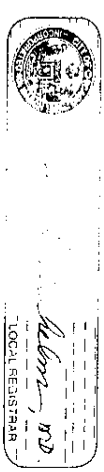
22a. SIGNATURE OF CERTIFIER: [Signature] DATE SIGNED: FEB 21 2005

22c. NAME AND ADDRESS OF CERTIFIER: W. HERRINGTON ST. CHICAGO, IL 22d. ILLINOIS LICENSE NUMBER: 036-093861

23. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY): Mexico MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): 8a Married NAME OF SURVIVING SPOUSE (MARRIAGE NAME, IF WIFE): Maria Villarreal

STATE OF ILLINOIS COUNTY OF COOK CITY OF CHICAGO 1 FEB 22 2005

I, JOHN L. WILHELM 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, STILLBIRTHS 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.



CITY OF CHICAGO DEPARTMENT OF PUBLIC HEALTH

THIS CERTIFICATE COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

UNOFFICIAL COPY

ALTA COMMITMENT (6/17/06)

Order Number TM258667
Assoc File No 104881

STEWART TITLE

GUARANTY COMPANY
HEREIN CALLED THE COMPANY

COMMITMENT - LEGAL DESCRIPTION

LOT 21 IN BLOCK 1 IN PIERCE'S HUMBOLDT PARK ADDITION TO CHICAGO, SAID ADDITION BEING A SUBDIVISION OF THE NORTHEAST 1/4 OF THE NORTHEAST 1/4 (EXCEPT THE SOUTHWEST 1/4 THEREOF) OF SECTION 2, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN # 16-02-203-013

3244 West Pierce Ave

Chicago, IL

Property of Cook County Clerk's Office