



Doc#: 0834046018 Fee: \$62.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 12/05/2008 02:34 PM Pg: 1 of 3

CTIC-HE



Chicago Title Insurance Company

BP

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF COOK

} ss.

Order No. _____

ETHEL STILL being duly sworn
states that HE resides at 9002 S. MACKINAW in the City of
CHICAGO, IL
That HE was acquainted with ANNA LEE STILL
deceased who, at the time of HER death, was one of the owners of the land in COOK
County, Illinois, described as:

That the deceased died ON DEC. 26, 1996, 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 _____ dollars.

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

Subscribed and sworn to before me by the said

ETHEL STILL

this 21ST day of NOVEMBER A.D. 2008

Chris Poellot

Notary Public

Ethel Still

(affiant's signature)

FORM 3703

Official Seal
Chris Poellot
Notary Public State of Illinois
My Commission Expires 08/04/2010

276800-PT-163-PEI

UNOFFICIAL COPY

STATE OF ILLINOIS
County of Cook

DAVID ORR, County Clerk

DEC 23 2002

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.

David Orr
COUNTY CLERK

REGISTRATION DISTRICT NO. **16.10**
REGISTERED NUMBER

STATE OF ILLINOIS

STATE FILE NUMBER

MEDICAL CERTIFICATE OF DEATH

622566

DECEASED-NAME FIRST MIDDLE LAST SEX DATE OF DEATH (MONTH DAY YEAR)
ANNA LEE STILL FEMALE 3 December 26, 1996

COUNTY OF DEATH AGE-LAST BIRTHDAY (YRS) UNDER 1 YEAR UNDER 1 DAY DATE OF BIRTH (MONTH DAY YEAR)
COOK 81 5a 81 5b 5c JUNE 19, 1915

CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER HOSPITAL OR OTHER INSTITUTION NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) IF HOSP OR INST. INDICATE D.O.A. OR EMER. RM. INPATIENT (SPECIFY)
CHICAGO SOUTH CHICAGO COMMUNITY 6c D.O.A.

BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) NAME OF SURVIVING SPOUSE (MAIDEN NAME IF WIFE) WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO)
MANAUM, LA 8a MARRIED 8b ETHEL STILL 9 NO

SOCIAL SECURITY NUMBER USUAL OCCUPATION KIND OF BUSINESS OR INDUSTRY EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)
319-62-6752 11a Homemaker 11b Home 12 Elementary Secondary (12) College (14 to 15)

RESIDENCE (STREET AND NUMBER) CITY, TOWN, TWP. OR ROAD DISTRICT NO. INSIDE CITY (YES/NO) COUNTY
9002 S. MACKINAW CHICAGO YES COOK

STATE ZIP CODE RACE (WHITE, BLACK, AMERICAN INDIAN, OR OTHER) (SPECIFY) OF HISPANIC ORIGIN? (SPECIFY NO OR YES; IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, OR OTHER) (SPECIFY)
ILLINOIS 131.60617 14a Black 14b NO () YES SPECIFY

FATHER-NAME FIRST MIDDLE LAST MOTHER-NAME FIRST MIDDLE (MAIDEN) LAST
ISSAC ROGERS ELIVERA MCDOWELL

INFORMANT'S NAME (TYPE OR PRINT) RELATIONSHIP MARITAL ADDRESS (STREET AND NO. OR R.F.D. CITY OR TOWN, STATE, ZIP)
ETHEL STILL 17b Husband 17c 9002 S. MACKINAW, CHICAGO, ILL

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, shock, or heart failure. List only one cause on each line. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
Immediate Cause (Final disease or condition resulting in death) (a) Arrhythmia
DUE TO, OR AS A CONSEQUENCE OF
CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) (b) Cardiac conduction system disease
DUE TO, OR AS A CONSEQUENCE OF
CAUSE LAST (c)

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I. AUTOPSY (YES/NO) WHEN AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH (YES/NO)
Hypothyroidism, Hypertension, Dementia (mid) 19a No 19b -

DATE OF OPERATION IF ANY MAJOR FINDINGS OF OPERATION IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS?
20a 20b 20c YES NO

(DD) (DDMM) ATTEND THE DECEASED (MONTH, DAY, YEAR) AND LAST SAW HIM/HER ALIVE ON WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) HOUR OF DEATH
21a 12/24/96 21b NO 21c 2:40 P.M.

TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED DATE SIGNED (MONTH DAY YEAR)
22a 22b 12/30/96

SIGNATURE NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) ILLINOIS LICENSE NUMBER
22a Stephen C. Whitmore MD 22b 036084563

NAME AND ADDRESS OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT) NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.
22c 9119 Exchange Chicago IL 60617

BURIAL, CREMATION, REMOVAL (SPECIFY) CEMETERY OR CREMATORY-NAME LOCATION CITY OR TOWN STATE DATE (MONTH DAY YEAR)
24a Burial 24b Washington 24c Homewood, ILLINOIS 24d JAN. 3, 1997

FUNERAL HOME NAME STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE
25a Taylor Funeral Home, LTD 63 E. 79th St. Chicago, IL 60619

FUNERAL DIRECTOR'S SIGNATURE FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER
25b [Signature] 25c 036010650

LOCAL REGISTRAR'S SIGNATURE DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)
26a [Signature] 26b DEC 31 1996

UNOFFICIAL COPY

STREET ADDRESS: 9002 S. MACKINAW AVE

CITY: CHICAGO

COUNTY: COOK

TAX NUMBER: 26-05-109-017-0000

LEGAL DESCRIPTION:

LOTS 2 AND 3 IN BLOCK 59 IN CALUMET, CHICAGO CANAL AND DOCK COMPANY PART OF FRACTIONAL SECTIONS 5 AND 6, TOWNSHIP 37 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office