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Doc#: 0928239017 Fee: \$42.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 10/09/2009 11:18 AM Pg: 1 of 4

AFFIDAVIT AS TO ORIGINAL DOCUMENT

571569 1/3

State of Illinois)
County of Cook) ss.

WITNESSETH, that the affiant, Daniel Denig, under oath and being fully advised as to the premises and circumstances, and being of sound mind and of legal age, and in reference to title to the premises, legally described as follows; to-wit:

LEGAL: SEE ATTACHED EXHIBIT "A"

PIN: 15-10-414-006

ADDRESS: 415 S. 13th Avenue, Maywood, Illinois 60153

does hereby affirmatively state that the Death Joint Tenancy Affidavit attached hereto is a true and exact copy of the original document from our file which was executed by the parties. That the original of same has not been recorded and cannot be located. This document is being recorded for the purposes of placing a notice of said document in the public records.

FURTHER, Affiant say not.

Daniel Denig

STATE OF ILLINOIS) SS
COUNTY OF Cook)

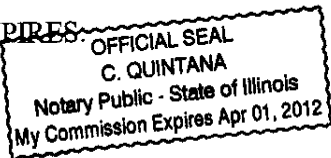
I, THE UNDERSIGNED, A NOTARY PUBLIC IN AND FOR SAID COUNTY AND STATE DO HEREBY CERTIFY THAT DANIEL DENIG, BEING PERSONALLY KNOWN TO ME TO BE THE SAME PERSON WHOSE NAME WAS SUBSCRIBED TO THE FOREGOING INSTRUMENT, APPEARED BEFORE ME THIS DAY IN PERSON AND ACKNOWLEDGED THAT HE SIGNED AND DELIVERED THE SAID INSTRUMENT AS HIS FREE AND VOLUNTARY ACT, FOR THE USES AND PURPOSES THEREIN SET FORTH.

GIVEN UNDER MY HAND AND OFFICIAL SEAL, THIS 8th of October, 2009.

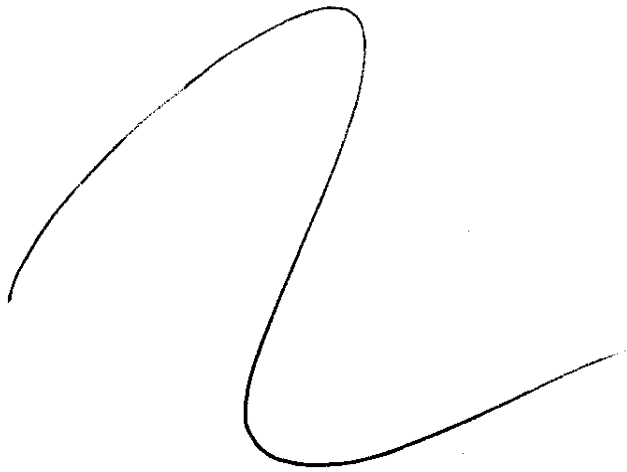
C. Quintana
NOTARY PUBLIC

Prepared by and return to:
Stewart Title Company
2055 W. Army Trail Road
Suite 110
Addison, IL 60101

MY COMMISSION EXPIRES



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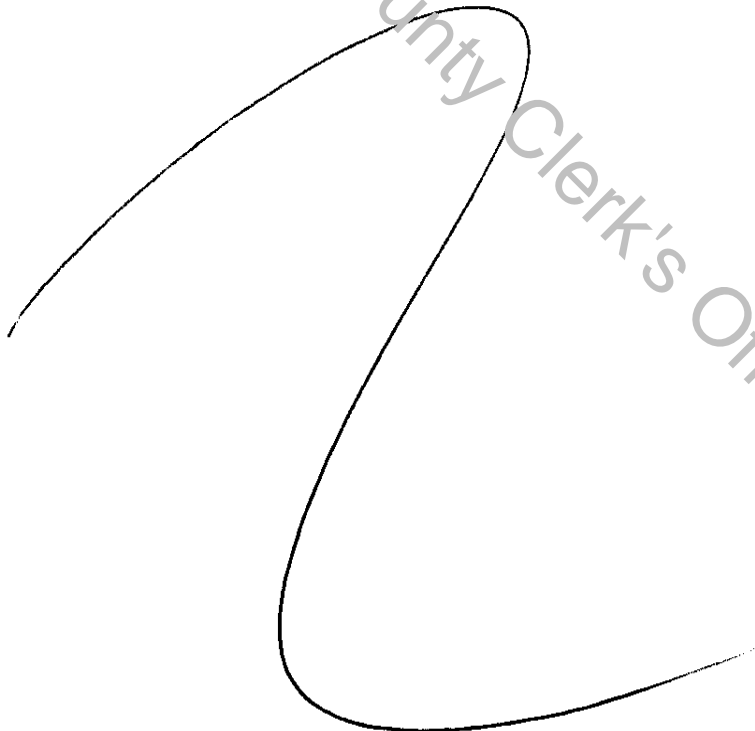


570809 1/3

DECEASED JOINT TENANCY AFFIDAVIT

(Melvin L. Jackson, a.k.a. Melvin Jackson)

(Page 1 of 2)



Property
Cook County Clerk's Office

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DECEASED JOINT TENANCY AFFIDAVIT

State of Illinois)
) SS:
County of Cook)

GLORIA CLAY, AFFIANT, being duly sworn states that she resides at 1836 South 6th Avenue, Maywood, Illinois. Affiant was acquainted with **Melvin L. Jackson, a.k.a. Melvin Jackson, DECEDENT**, who was the natural father of Affiant.

At the time of Decedent's death, Decedent was one of the owners of the land in Cook County, Illinois, with the common address of 415 South 13th Avenue, Maywood, Illinois, and described as follows:

LOT 431 IN MADISON STREET ADDITION SUBDIVISION, BEING A SUBDIVISION OF PART OF SECTION 10, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Affiant further states:

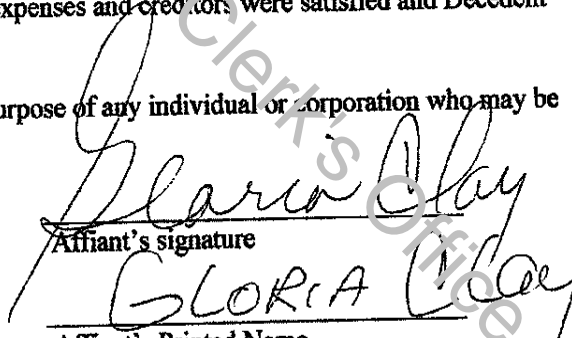
That Decedent's ownership interest in the aforementioned property was created by joint tenancy deed, dated July 18, 1968, and recorded in the office of the Cook County Recorder of Deeds on October 10, 1968.

That Decedent died November 11, 1969, leaving no last will and testament, and, further, that the total value of the estate of Decedent at his death, for estate tax purposes, did not exceed the sum of \$100,000. (Death certificate is attached.)

That all of Decedent's death related expenses and creditors were satisfied and Decedent has no outstanding creditors.

Affiant makes this affidavit for the purpose of any individual or corporation who may be harmed by the Affiant's lack of veracity.

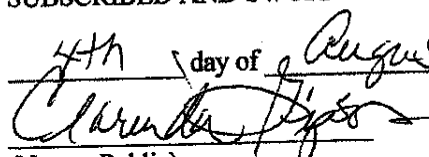
Date: 8-4-08

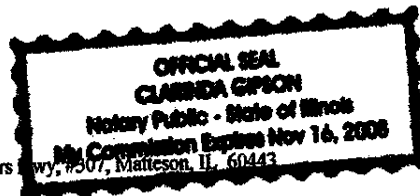

Affiant's signature

GLORIA CLAY
Affiant's Printed Name

SUBSCRIBED AND SWORN TO before me by the said Gloria Clay this

4th day of August, 2008.


(Notary Public)



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STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 16.10 REGISTERED NUMBER 16.10 STATE FILE NUMBER 634216

DECEASED—NAME: **Melvin Jackson** SEX: **Male** DATE OF DEATH: **11-20-69**

RACE: **Negro** AGE: **53** DATE OF BIRTH: **10-20-16** PLACE OF BIRTH: **Cook**

CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER: **Chicago** HOSPITAL OR OTHER INSTITUTION—NAME: **Garfield Park Hospital 3821 W. Washington Blvd.**

CITIZENSHIP: **Missouri** CITIZEN OF WHAT COUNTRY: **United States** MARRIED, NEVER MARRIED, WIDOWED, DIVORCED: **Divorced** NAME OF SURVIVING SPOUSE: **None**

SOCIAL SECURITY NUMBER: **[REDACTED]** USUAL OCCUPATION: **Retired** KIND OF BUSINESS OR INDUSTRY: **Steel Co.** U.S. WAR VETERAN: **No** WAR OR DATES OF SERVICE: **None**

RESIDENCE: **Illinois** COUNTY: **Cook** CITY, TOWN, TWP. OR ROAD DISTRICT NO.: **Chicago Maywood** STREET AND NUMBER: **115 S. 13th. Maywood, Ill.**

FATHER—NAME: **Unknown** MOTHER—MAIDEN NAME: **Hannie Elmore**

INFORMANT'S SIGNATURE: **Patricia G. Foster** RELATIONSHIP: **Hosp. Rec.** MAILING ADDRESS: **3821 W. Washington Blvd. Chgo., Ill. 60624**

DEATH WAS CAUSED BY: **HEPATIC COMA**

CONDITIONS, IF ANY, WHICH GIVE RISE TO UNDERLYING CAUSE: **CIRRHOSIS OF LIVER**

OTHER SIGNIFICANT CONDITIONS: **CHRONIC ALCOHOLISM**

DATE OF OPERATION, IF ANY: **None** MAJOR FINDINGS OF OPERATION: **None**

ATTENDED THE DECEASED FROM: **11-17-69** TO: **11-21-69** DATE OF DEATH: **11-20-69** HOUR OF DEATH: **6:00 AM**

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THIS DEATH OCCURRED ON THE DATE, AT THE TIME AND PLACE, AND FROM THE CAUSE(S) STATED.

SIGNATURE: **Glenn F. Byrum M.D.** DATE SIGNED: **11-22-69** ILLINOIS LICENSE NUMBER: **36-41346**

MAILING ADDRESS—CERTIFIER: **3711 W. ROOSEVELT CHICAGO**

BURIAL, CREMATION, REMOVAL (specify): **BURIAL** CEMETERY OR CREMATORY—NAME: **Burr Oak** LOCATION: **24c. Worth** CITY OR TOWN: **Illinois** DATE: **11/29/69**

FUNERAL HOME: **A. A. Rayner & Sons 3660 W. Roosevelt Rd. Chicago, Ill. 60624**

FUNERAL DIRECTOR'S SIGNATURE: **[Signature]** FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER: **[REDACTED]**

LOCAL REGISTRAR'S SIGNATURE: **[Signature]** CHICAGO BOARD OF HEALTH DATE REGD. BY: **NOV 23 1969**

ILLINOIS DEPARTMENT OF PUBLIC HEALTH—BUREAU OF VITAL RECORDS

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COPY

0337226



County of Cook
State of Illinois

Office of County Clerk
David Orr

David Orr
DAVID ORR COUNTY CLERK



This copy is not valid unless displaying embossed seals of Cook County and County Clerk signature.