

UNOFFICIAL COPY



Doc#: 0928810050 Fee: \$42.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 10/15/2009 02:09 PM Pg: 1 of 4

RECORDING REQUESTED BY
Old Republic Title Company

AND WHEN RECORDED MAIL TO
Old Republic Title Company- Attn: Post Closing
530 South Main Street, Ste 1031
Akron, OH 44311
866-235-4326
21175424-R

Tax ID: 25-20-207-002-0000

SPACE ABOVE THIS LINE RESERVED FOR RECORDER'S USE

AFFIDAVIT OF FACTS RELATING TO TITLE

PJG

**This page is added to allow adequate space for recording information
Please Do Not Remove**

UNOFFICIAL COPY

STATE OF ILLINOIS)
COUNTY OF COOK) ss.

AFFIDAVIT OF FACTS RELATING TO TITLE

21175424R

Being first duly sworn according to law, under penalties of perjury, the undersigned (hereinafter "Affiant"), does hereby state as follows:

My full legal name is: Ernestine Davis

By virtue of instrument dated _____, recorded _____, in Volume _____, Page _____ of County Records, title was conveyed to Ernestine Davis and _____, A SINGLE WOMAN as Joint Tenants to the following described real estate:

WHEN RECORDED RETURN TO:
OLD REPUBLIC TITLE
ATTN: POST CLOSING
500 SOUTH MAIN STREET
SUITE 1031
AKRON, OH 44311

(SEE EXHIBIT A)

As evidenced by the certified copy of the death certificate attached, JESSIE L. DAVIS is now deceased.

The purpose of this Affidavit is to transfer record title of the above described premises to the survivor,

Further, the Affiant sayeth naught.

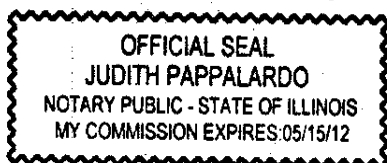
AFFIANT:

RECORD

Ernestine Davis
Ernestine Davis

Sworn to before me and subscribed in my presence this 25th day of September, 2009 by ERNESTINE DAVIS

PREPARED BY: FRANK DEAN, URBAN FINANCIAL GROUP, 9175 S. YALE AVE, STE. 300, TULSA, OK 74137



Judith Pappalardo
Notary Public JUDITH PAPPALARDO

REGISTRATION DISTRICT NO. 16.10
REGISTERED NUMBER

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 600515

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

116 2007

FERRY MASON 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.

1. DECEASED-NAME	FIRST	MIDDLE	LAST	SEX	DATE OF DEATH (MONTH, DAY, YEAR)
	JESSIE	L.	DAVIS	MALE	JANUARY 10, 2007
2. COUNTY OF DEATH	COOK				
3. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER	CHICAGO				
4. AGE LAST BIRTHDAY (YRS)	5a.	62	5b. MONTHS	5c. DAYS	5d. DATE OF BIRTH (MONTH, DAY, YEAR)
					SEPTEMBER 17, 1944
5. HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)	6b. THE UNIVERSITY OF CHICAGO HOSPITALS				
6. CHICAGO	6c. INPATIENT				
7. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)	8a. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)				
8. CHARLESTON, MS.	8b. EARNESTINE WILLIAMS				
9. SOCIAL SECURITY NUMBER	10. NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)				
5180	11. KIND OF BUSINESS OR INDUSTRY				
	11a. Contractor				
11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)	12. EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)				
11a. Contractor	12. Construction				
12. USUAL OCCUPATION (GENERAL)	13. INSIDE CITY (YES/NO)				
11a. Contractor	13. YES				
13. STATE	13a. 1053 W. 111th Pl.				
13a. ILL.	13b. CHICAGO				
13b. ZIP CODE	13c. COUNTY				
13c. 60643	13d. COOK				
14. RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY)	14a. BLACK				
14a. BLACK	14b. OF HISPANIC ORIGIN? (SPECIFY YES OR NO)				
14b. MADKINS	14c. YES				
15. FATHER-NAME	15. JOHN				
15. MOTHER-NAME	15. MINNIE				
16. MOTHER-NAME	16. DAVIS				
17. FORMER'S NAME (TYPE OR PRINT)	17a. DARLENE PARKS				
17a. DARLENE PARKS	17b. RELATIONSHIP				
	17c. HOSPITAL RECORDS				
	17d. CHICAGO				
	17e. SOUTH MARYLAND AVENUE				
	17f. CHICAGO, ILLINOIS				
	17g. 5841				
	17h. 5065				

18. PART I. IMMEDIATE CAUSE (Final disease or condition resulting in death)

18. NON TRAUMATIC INTRACEREBRAL HEMORRHAGE

19. CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) DUE TO, OR AS A CONSEQUENCE OF (b) DUE TO, OR AS A CONSEQUENCE OF (c)

20. 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.

21. PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.

21a. DATE OF OPERATION, IF ANY

21b. MAJOR FINDINGS OF OPERATION

21c. AUTOPSY (YES/NO)

21d. IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS?

21e. HOUR OF DEATH

21f. DATE SIGNED (MONTH, DAY, YEAR)

21g. ILLINOIS LICENSE NUMBER

21h. NOTE: IF AN INQUIRY WAS INVOLVED IN THIS DEATH THE CORNER OR MEDICAL EXAMINER MUST BE NOTIFIED.

22. NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT)

22. SYED HUSSAIN, M.D.
8841 SOUTH MARYLAND AVENUE
CHICAGO, ILLINOIS 60637

23. NAME OF ATTENDING PHYSICIAN/OTHER THAN CERTIFIER (TYPE OR PRINT)

23. AXEL ROSENGART, M.D.

24. BURNIAL, CREMATION, REMOVAL (SPECIFY)

24a. CEMETERY OR CREMATORY-NAME

24b. MT. HOPE CEMETERY

24c. LOCATION

24d. CHICAGO, IL

24e. CITY OR TOWN

24f. STATE

24g. DATE (MONTH, DAY, YEAR)

24h. 1-16-07

24i. ZIP

25. FUNERAL HOME

25a. GATLING'S CHAPEL INC, 10133 S. HALSTED ST CHICAGO, IL 60628

25b. STREET AND NUMBER OR R.F.D.

25c. CITY OR TOWN

25d. STATE

25e. ZIP

26. LOCAL REGISTRAR'S SIGNATURE

26a. [Signature]

26b. DATE FILED IN LOCAL RECORDS (MONTH, DAY, YEAR)

26c. JAN 16 2007



CITY OF CHICAGO
DEPARTMENT OF PUBLIC HEALTH

THIS CERTIFICATE COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

UNOFFICIAL COPY

UNOFFICIAL COPY

"EXHIBIT A"

SITUATE IN THE COUNTY OF COOK, STATE OF ILLINOIS:

LOT 3 IN JOHN R. MCCABE'S SUBDIVISION OF BLOCK 20 OF GEORGE G STREET'S SUBDIVISION OF THE WEST HALF OF THE SOUTH EAST QUARTER OF SECTION 17, AND THE NORTH 20 ACRES OF THE NORTH WEST QUARTER OF THE NORTH EAST QUARTER OF SECTION 20, TOWNSHIP 37 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

TAX I.D. NO: 25-20-207-002-0000

BEING THE SAME PROPERTY CONVEYED BY JOINT TENANCY DEED
GRANTOR: CHICAGO CITY BANK AND TRUST COMPANY, A CORPORATION OF ILLINOIS AS TRUSTEE UNDER THE PROVISION OF A DEED OR DEEDS IN TRUST
GRANTEE: JESSE L. DAVIS AND ERNESTINE DAVIS, HIS WIFE, AS JOINT TENANTS
DATED: 5/21/1973
RECORDED: 8/20/1973
DOC#/BOOK-PAGE: 224445764

NOTE: FOR STREET NUMBERING PURPOSES KNOWN AS: 1053 W 111TH PL, CHICAGO, IL 60643-4636