



Doc#: 0931646009 Fee: \$40.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 11/12/2009 12:10 PM Pg: 1 of 3

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS (ss. Order No. _____)
COUNTY OF COOK

RALPH J. TILL being duly sworn
states that HE resides at 6952 KINGSTON Court in the City of
TINLEY PARK IL 60477

That He was acquainted with Claire N Till
deceased who, at the time of HER death, was one of the owners of the land in
6952 KINGSTON Ct TINLEY PARK IL 60477 County, Illinois, described as:

VOLUME 031 CODE 13039 COOK'S
Property Index # 28-19-300-077 0000 6952 KINGSTON Ct TINLEY PARK IL
60477

That the deceased died December 19, 2007, 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 COOK 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 deceased, does not exceed the sum of \$65,000 dollars.

Subscribed and sworn to before me by the said
Ralph Till
this 5 day of Nov .A.D. 20 09

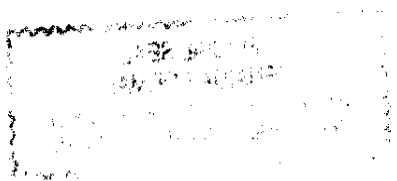


[Signature]
NOTARY PUBLIC
Ralph J Till
(affiant's signature)

UNOFFICIAL COPY

LOT 2 in Bremontown Park Townhouse Resubdivision Phase 11. Being a Resubdivision
THAT
OF Part ~~OF~~ LOT 1 Bremontown project subdivision (Except that Part taken for
Bremontown Park Townhouse Resubdivision Phase 1) OF PART OF THE North Half of the
Southwest quarter of Section 19, Township 36 North, Range 13 East of the third
Principal meridian, in Cook County, Illinois.

Property of Cook County Clerk's Office



UNOFFICIAL COPY

CERTIFICATE OF VITAL RECORD

HARVEY, ILLINOIS DISTRICT 16.34

DECEDENT'S BIRTH NO.	REGISTRATION DISTRICT NO. 16.34	STATE OF ILLINOIS	STATE FILE NUMBER	
	REGISTERED NUMBER	MEDICAL CERTIFICATE OF DEATH		
Type or Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS DECEASED CAUSE DISPOSITION	1. DECEASED-NAME FIRST MIDDLE LAST Claire N. Till		2. SEX Female	
	3. DATE OF DEATH (MONTH, DAY, YEAR) Dec. 19, 2007			
	4. COUNTY OF DEATH Cook		5a. AGE-LAST BIRTHDAY (YRS) MOS. DAYS 5a. 69	5b. UNDER 1 YEAR UNDER 1 DAY HOURS MIN 5b.
	6. DATE OF BIRTH (MONTH, DAY, YEAR) 5d. Dec. 27, 1937		7. CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER 8a. Harvey	
	8. HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) 6b. Ingalls Hospital		9. IF HOSP. OR INST. INDICATE D.O. OP/EMER. RM. INPATIENT (SPECIFY) 6c. Inpatient	
	10. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) 7. Canada		11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) 8a. Divorced	
	12. NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)		13. WAS DECEASED EVER ARMED FORCES? (YES/NO) 9. No	
	14. SOCIAL SECURITY NUMBER 10. 226-32-6743		15. USUAL OCCUPATION 11a. Homemaker	
	16. KIND OF BUSINESS OR INDUSTRY 11b. Own Home		17. EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) Elementary/Secondary (0-12) College (1-4 or 5+) 12. 4	
	18. RESIDENCE (STREET AND NUMBER) 13a. 6972 Kingston Ct.		19. CITY, TOWN, TWP, OR ROAD DISTRICT NO. 13b. Tinley Park	
20. STATE 13c. IL		21. INSIDE CITY (YES/NO) 13c. Yes		
22. ZIP CODE 13d. 60477		23. COUNTY 13d. Cook		
24. FATHER-NAME FIRST MIDDLE LAST 15. Antoine Menard		25. MOTHER-NAME FIRST MIDDLE (MAIDEN) LAST 16. Irma n/a		
26. INFORMANT'S NAME (TYPE OR PRINT) 17a. Ralph Till		27. RELATIONSHIP 17b. Husband		
28. MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TWP, STATE, ZIP) 17c. 6952 Kingston Ct Tinley Pk, IL				
29. PART I. Enter the diseases, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH.				
30. IMMEDIATE CAUSE (Final disease or condition resulting in death) (a) Metastatic Lung Cancer				
31. CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST. (b) Cancer of Breast				
32. PART II. Other significant conditions contributing to death but not resulting in the underlying cause reported in PART I.				
33. DATE OF OPERATION, IF ANY		34. MAJOR FINDINGS OF OPERATION		
35. AUTOPSY (YES/NO) 19a. No		36. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (YES/NO) 19b.		
37. (DID) (DID NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON 21a. 12/18/07		38. WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) 21b. No		
39. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.		40. HOUR OF DEATH 21c. 5:15 A.		
41. SIGNATURE 22a. G. Gottumukkala		42. DATE SIGNED (MONTH, DAY, YEAR) 22b. 12/20/2007		
43. NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) 22c. G. Gottumukkala 6701 W. 159th Tinley Pk. IL 60477		44. ILLINOIS LICENSE NUMBER 22d. 036074987		
45. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT) 23. Michael F. Gill, Jr				
46. NOTE: IF AN INJURY WAS INVOLVED IN THE DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.				
47. BURIAL, CREMATION, REMOVAL (SPECIFY) 24a. Cremation		48. CEMETERY OR CREMATORY-NAME 24b. Skyline		
49. FUNERAL HOME NAME 25a. BRADY-GILL 16600 S. Oak Pk Tinley Park, IL 60477		50. LOCATION CITY OR TOWN STATE 24c. Monee, IL		
51. FUNERAL DIRECTOR'S SIGNATURE 25b. Michael F. Gill, Jr		52. DATE (MONTH, DAY, YEAR) 24d. 12/28/2007		
53. LOCAL REGISTRAR'S SIGNATURE 26a.		54. FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 25c. 034-011540		
55. DATE FILED LOCAL REGISTRAR (MONTH, DAY, YEAR) 26b. DEC 20 2007		56.		

VR200 (Rev. 5/89)

Illinois Department of Public Health—Division of Vital Records

(BASED ON 1980 U.S. STANDARD CERTIFIC.)

CERTIFIED COPY OF VITAL RECORDS

I HEREBY CERTIFY THAT THE FOREGOING is a true and correct copy of the DEATH record for the individual named therein and that this record was established and filed in my office in accordance with the provisions of the ILLINOIS STATUTES relating to the registration of BIRTHS, STILLBIRTHS and DEATHS.

D63010

DATE ISSUED

DEC 20 2007

ISSUED AT:

CITY OF HARVEY
15320 SO. BROADWAY AVE.
ILLINOIS 60426

Nancy L. Clark
NANCY L. CLARK
LOCAL REGISTRAR

This copy not valid unless prepared on engraved border displaying seal and signature of Local Registrar.