

# UNOFFICIAL COPY



## DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS )SS  
COUNTY OF COOK )

Doc#: 1000834005 Fee: \$38.00  
Eugene "Gene" Moore RHSP Fee:\$10.00  
Cook County Recorder of Deeds  
Date: 01/08/2010 08:39 AM Pg: 1 of 2

**LORRAINE S. LOCKIE** being duly sworn states that she resides at 18252 Murphy Circle, Tinley Park, Illinois 60487.

That she was acquainted with **THOMAS F. LOCKIE** deceased, who, at the time of his death, was one of the owners of the land in Cook County, Illinois, described as:

Legal Description:  
Unit Number 18252 in Heritage Club Condominium, as delineated on a survey of the following described real estate:  
Various lots in Heritage Club Villas, being a subdivision of the South 654.00 feet of the South 1/2 of the West 3/4 of the East 1/2 of the Southwest 1/4 of Section 34, Township 36 North, Range 12, East of the Third Principal Meridian, in Cook County, Illinois, which survey is attached as Exhibit "B" to the Declaration recorded July 9, 2001 as Document Number 0010601588, as amended from time to time, together with its undivided percentage interest in the common elements.

PIN: 27-34-306-013-1064

Address: 18252 Murphy Circle, Tinley Park, Illinois 60487

That the deceased died October 15, 2009 as evidenced by a certified copy of the 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.

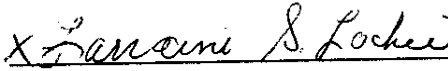
Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of Cook County, Illinois.

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 lifetime unified exemption equivalent for federal estate tax purposes.

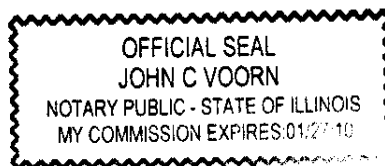
Affiant makes this affidavit for the purpose of inducing a title company to issue its Title Insurance Policy describing the above-mentioned property.

Subscribed and sworn to before me this 21<sup>ST</sup> day of DECEMBER, 2009.

  
Notary Public

  
Lorraine S. Lockie

This Instrument Prepared By and Return To:  
John C. Voorn, Esq.  
Hiskes, Dillner, O'Donnell, Marovich & Lapp, Ltd.  
10759 West 159th Street, Suite 201  
Orland Park, Illinois 60467  
(708) 403-5050  
Firm ID No.: 80407  
N:\VOORN\estates\lockie thomas deceased joint tenancy affidavit



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## CERTIFICATION OF DEATH RECORD

### CHICAGO, ILLINOIS MEDICAL EXAMINER/CORONER CERTIFICATE OF DEATH

STATE FILE NUMBER 2009 0075487

DATE ISSUED 10/20/2009

DECEDENT'S LEGAL NAME THOMAS FRANCIS LOCKIE				SEX MALE	DATE OF DEATH OCTOBER 15, 2009
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 81 YEARS	DATE OF BIRTH MARCH 11, 1928			
CITY OR TOWN PALOS HEIGHTS	HOSPITAL OR OTHER INSTITUTION NAME PALOS COMMUNITY HOSPITAL				
PLACE OF DEATH INPATIENT					
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER 313-██████	MARITAL STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE'S NAME LORRAINE S SULLIVAN	EVER IN U.S. ARMED FORCES? YES	
RESIDENCE 18252 MURPHY CIRCLE	APT. NO.	CITY OR TOWN TINLEY PARK		INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60487	FATHER'S NAME DAVID LOCKIE	MOTHER'S NAME PRIOR TO FIRST MARRIAGE GLADYS WIGGINS	
INFORMANT'S NAME LORRAINE S LOCKIE	RELATIONSHIP WIFE	MAILING ADDRESS 18252 MURPHY CIRCLE, TINLEY PARK, IL, 60487			
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION ABRAHAM LINCOLN NATIONAL CEMETERY	LOCATION - CITY OR TOWN AND STATE ELWOOD, IL	DATE OF DISPOSITION OCTOBER 19, 2009		
FUNERAL HOME COLONIAL CHAPEL, 15525 S 73RD AVE, ORLAND PARK, IL, 60462					
FUNERAL DIRECTOR'S NAME EDWARD J DAMSTRA			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014329		
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR OCTOBER 19, 2009		
<b>CAUSE OF DEATH</b> PART I. PNEUMONIA IMMEDIATE CAUSE <small>(Final disease or condition resulting in death)</small> a. _____ Due to (or as a consequence of): b. MULTIPLE INJURIES _____ Due to (or as a consequence of): c. PICKUP TRUCK MINIVAN COLLISION _____ Due to (or as a consequence of):					
PART II. Enter other <i>significant conditions contributing to death</i> but not resulting in the underlying cause given in PART I.				WAS AN AUTOPSY PERFORMED? NO WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A MANNER OF DEATH ACCIDENT	
DID TOBACCO USE CONTRIBUTE TO DEATH? UNKNOWN	FEMALE PREGNANCY STATUS NOT APPLICABLE				
DATE OF INJURY OCTOBER 8, 2009	TIME OF INJURY 11:45 AM	PLACE OF INJURY STREET AND HIGHWAY	INJURY AT WORK? NO		
LOCATION OF INJURY 179TH ST 94TH AVE, TINLEY PARK, IL, 60477					
DESCRIBE HOW INJURY OCCURRED: FRONT SEAT PASSENGER IN MINIVAN STRUCK BY PICKUP TRUCK				IF TRANSPORTATION INJURY, SPECIFY: PASSENGER	
ATTEND THE DECEASED?	DATE LAST SEEN ALIVE	WAS MEDICAL EXAMINER OR CORONER CONTACTED?	DATE PRONOUNCED OCTOBER 15, 2009	TIME OF DEATH 09:40 PM	
CERTIFIER: MEDICAL EXAMINER/CORONER				DATE CERTIFIED OCTOBER 16, 2009	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH NANCY L JONES MD, 2121 W HARRISON ST, CHICAGO, IL, 60612				PHYSICIAN'S LICENSE NUMBER	



This is to certify that this is a true and correct copy from the official death record filed with Illinois Department of Health.

*David Orr*  
David Orr  
Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE