



Doc#: 1012710016 Fee: \$40.00
Eugene "Gene" Moore
Cook County Recorder of Deeds
Date: 05/07/2010 10:16 AM Pg: 1 of 3

Property Appraisers Parcel Identification (Folio) Number(s):

25-11-122-021-0000

FILE NO.:

20075108

DECEASED JOINT TENANT AFFIDAVIT

STATE OF Illinois

COUNTY OF Cook

SSN:

George Grant

being first duly sworn, for the purpose of inducing National Title Solutions, Inc. to issue it's title insurance policy covering the land described in the above captioned commitment, deposes and says;

- 1.) That he/she resides at 9800 S. Dobson Chgo IL 60628
- 2.) That he/she was acquainted with Mildred Grant who died on 9-30-2005 as evidenced by the attached certified copy of the death certificate.
- 3.) That said decedent was one of the owners of the land described in the above captioned commitment.
- 4.) That said decedent died:
 - leaving no last will and testament
 - leaving a last will and testament, a copy of which is attached
- 5.) That the total value of said decedents estate for State of Illinois Inheritance Tax/Estate Tax and Federal Estate Tax purposes does not exceed \$ _____

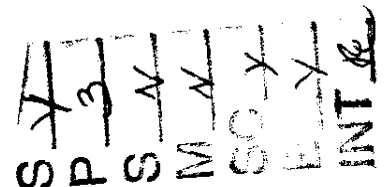
George Grant
Affiant's Signature

Sworn to and subscribed before me this 9 day of April 2010, by IL DR LIL who is personally known to me or who has produced a driver license as identification.

My Commission expires:

11/20/13

Helen F. Mitchell-Carter
Printed Name: Printed Name:
Notary Public Helen F. Mitchell-Carter
Serial Number



UNOFFICIAL COPY

REGISTRATION DISTRICT NO. 46-10 REGISTERED NUMBER DECEASED NAME FIRST MIDDLE LAST SEX DATE OF BIRTH (MONTH, DAY, YEAR) DATE OF DEATH (MONTH, DAY, YEAR) MEDICAL CERTIFICATE OF DEATH NUMBER 613999

COUNTY OF DEATH Cook CITY, TOWN, TWP. OR ROAD/DISTRICT NUMBER Chicago MILDRED PILLON 2 Female 09-30-05 05-24-25

BRITISH BIRTHPLACE (COUNTY OR DISTRICT) 6a. Chicago MARRIED, NEVER MARRIED, WIDOWED OR DIVORCED (SPECIFY) 6b. Married NAME OF SURVIVING SPOUSE (NAME, NAME, F, W, E, E, E) 6c. George Grant

RESIDENCE (STREET AND NUMBER) 13a. 9900 South Dobson CITY, TOWN, TWP. OR ROAD/DISTRICT NO. Chicago 13b. Chicago 13c. Chicago 13d. Cook

FATHER'S NAME FIRST MIDDLE LAST 15. JAMES WILLIAM EAKINS 16. MARGARETTE BATTLE 17a. ZENOVIA EVANS 17b. Daughter 17c. 145 S. Atlantic

CONDITIONS, IF ANY WHICH GAVE RISE TO MENINGEAL CAUSE (A) STATING THE UNDERLYING CAUSE LAST (B) CONGESTIVE HEADACHE (C) GERMAN MEASLES

DATE OF OPERATION, IF ANY 20a. MAJOR FINDINGS OF OPERATION 20b. 20c. 20d. 20e. 20f. 20g. 20h. 20i. 20j. 20k. 20l. 20m. 20n. 20o. 20p. 20q. 20r. 20s. 20t. 20u. 20v. 20w. 20x. 20y. 20z.

22a. SIGNATURE OF PHYSICIAN (TYPE, PRINT) Ahmed M. Khawaja 17354 S. Ashland Ave. Chicago, IL. 22b. 10/09/05 22c. 036105743

23. BIRTHPLACE (COUNTY OR DISTRICT) 24a. Chicago 24b. Cook 24c. Chicago 24d. Cook 24e. Chicago 24f. Cook 24g. Chicago 24h. Cook 24i. Chicago 24j. Cook 24k. Chicago 24l. Cook 24m. Chicago 24n. Cook 24o. Chicago 24p. Cook 24q. Chicago 24r. Cook 24s. Chicago 24t. Cook 24u. Chicago 24v. Cook 24w. Chicago 24x. Cook 24y. Chicago 24z. Cook

STATE OF ILLINOIS COUNTY OF COOK CITY OF CHICAGO

OCT 05 2005

1. JOHN L. WILHELM, M.D., LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS FOR THE CITY OF CHICAGO 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 OBTAINANCE OF S.A.I.D. LAW AND ORDINANCES.

John L. Wilhelm, M.D. LOCAL REGISTRAR

THIS CERTIFICATE COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

UNOFFICIAL COPY

EXHIBIT "A"

LOT 49 IN BLOCK 11 IN COTTAGE GROVE HEIGHTS, BEING A SUBDIVISION OF PARTS OF THE NORTH ½ OF SECTION 10 AND SECTION 11, TOWNSHIP 37 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN NO.: 25-11-122-021-0000

Property of Cook County Clerk's Office