

UNOFFICIAL COPY

DECEASED JOINT TENANCY AFFIDAVIT



Doc#: 1128540140 Fee: \$40.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 10/12/2011 04:16 PM Pg: 1 of 3

AFTER RECORDING, RETURN TO:

Harry E. DeBruyn, Atty.
DeBruyn, Taylor and DeBruyn Ltd.
15252 S. Harlem Avenue
Orland Park, IL 60462

NAME/ADDRESS OF TAXPAYER:

George J. Cooper
9720 South Pulaski Road, Unit 609
Oak Lawn, IL 60453

STATE OF ILLINOIS)
) SS.
COUNTY OF COOK)

George J. Cooper, being duly sworn, states that he resides at 9720 South Pulaski Road, Unit 609, Oak Lawn, IL 60453.

That **George J. Cooper** was acquainted with **Marguerite F. Cooper**, deceased, who, at the time of her death, was one of the owners of the land in Cook County Illinois, described as:

(SEE REVERSE SIDE FOR LEGAL DESCRIPTION)

Permanent Index No.: **24-10-226-066-1058**

Property Address: **9720 South Pulaski Road, Unit 609, Oak Lawn, IL 60453**

That the deceased died June 15, 2003, 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 Cook 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 death of the deceased, does not require the payment of Federal or State Inheritance taxes.

SCANNED
INDEXED
SERIALIZED
FILED
OCT 12 2011
CLERK OF COOK COUNTY

110332601036-

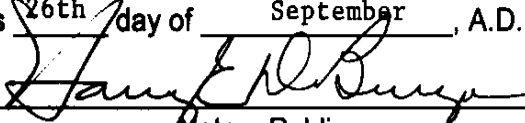
UNOFFICIAL COPY

Affiant makes this affidavit for the purpose of inducing the title company to issue its title insurance policy, describing the above mentioned property.


Subscribed and sworn to before me by the said

GEORGE J. COOPER

this 26th day of September, A.D. 2011.

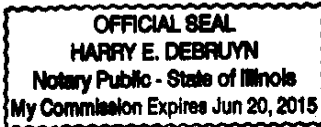


Notary Public



GEORGE J. COOPER

This Instrument Prepared By:



Harry E. DeBruyn, Atty.
DeBruyn, Taylor and DeBruyn Ltd.
15252 S. Harlem Avenue
Orland Park, IL 60462

LEGAL DESCRIPTION

Unit No. 9720-609 in Shibui Condominium as delineated on a survey of the following described real estate: The North 535.48 feet of Lot 2 in Bartolomeo and Milord Subdivision of the South 36-1/2 acres of the East 1/2 of the Northeast 1/4 of Section 10, Township 37 North, Range 13 East of the Third Principal Meridian, except the South 8-1/4 acres of the Northwest 1/4 of the Southeast 1/4 of the Northeast 1/4 of Section 10, Township 37 North, Range 13 East of the Third Principal Meridian in Cook County, Illinois, which survey is attached as Exhibit "D" to the Declaration of Condominium recorded as Document No. 24492625 together with its undivided percentage interest in the common elements.

Permanent Index No.: 24-10-226-066-1058

Property Address: 9720 South Pulaski Road, Unit 609, Oak Lawn, IL 60453

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JUN 17 2003

STATE OF ILLINOIS
County of Cook

DAVID ORR, County Clerk

I, David Orr, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the city of Chicago, in said County.

David Orr
COUNTY CLERK

DECEDENT'S BIRTH NO.	REGISTRATION DISTRICT NO. 16.0	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 A..... DECEASED B..... C..... D..... E..... PARENTS 1..... 2..... 3..... CAUSE 4..... 5..... N..... P..... CERTIFIER 24a..... 22a..... 22c..... DISPOSITION 24a..... 25a..... 25b..... 26a.....	DECEASED-NAME FIRST MIDDLE LAST		SEX	DATE OF DEATH (MONTH, DAY, YEAR)	
	1. Marguerite F. Cooper		2Female	3June 15, 2003	
	CITY OF DEATH		AGE-LAST BIRTHDAY (YRS)	UNDER 1 YEAR	DATE OF BIRTH (MONTH, DAY, YEAR)
	4 Cook		5a. 85	5b. 5	5c. June 2, 1918
	CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER		HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)		IF HOSP. OR INST. INDICATE D.O.A. OP/EMER. RM. INPATIENT (SPECIFY)
	6a. Oak Lawn		6b. 9720 S. Pulaski Rd. # 609		6c.
	BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)	NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)	
	7 Chicago, IL		8a. Married	8b. George J. Cooper	
	SOCIAL SECURITY NUMBER		USUAL OCCUPATION	KIND OF BUSINESS OR INDUSTRY	EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)
	10. 11Homemaker		11b. Own Home		12. 2
RESIDENCE (STREET AND NUMBER)		CITY, TOWN, TWP, OR ROAD DISTRICT NO.	INSIDE CITY (YES/NO)	COUNTY	
13a. 9720 S. Pulaski Rd. # 609		13b. Oak Lawn	13c. Yes	13d. Cook	
STATE		ZIP CODE	RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY)	OF HISPANIC ORIGIN? (SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.)	
13a. Illinois		13f. 60453	14a. White	14b. <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES SPECIFY:	
FATHER-NAME FIRST MIDDLE LAST		MOTHER-NAME FIRST MIDDLE LAST (MAIDEN) LAST			
15. Alfred VanDellen		15. Birdie Hoogsteen			
INFORMANT'S NAME (TYPE OR PRINT)		RELATIONSHIP	MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP)		
17a. George J. Cooper		17b. Husband	17c. 9720 S. Pulaski Rd., #609 Oak Lawn, IL 60453		
18. PART I. 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.				APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
Immediate Cause (Final disease or condition resulting in death)		(a) Coronary Heart Failure		3 years	
CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.		(b) Due to, or as a consequence of			
		(c) Due to, or as a consequence of			
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.					
DATE OF OPERATION, IF ANY		MAJOR FINDINGS OF OPERATION	AUTOPSY (YES/NO)	WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (YES/NO)	
20a.		20b. Anemia, Rectal Hemorrhage, Polyomyelitis	19a. NO	19b. NO	
I (DID) (DID NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON (MONTH, DAY, YEAR)		WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO)	HOUR OF DEATH		
21a. June 11, 2003		21b. NO	21c. 06:00A M.		
TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.					
22a. SIGNATURE Sam Farbstein		DATE SIGNED (MONTH, DAY, YEAR)			
NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT)		ILLINOIS LICENSE NUMBER			
22c. Dr. Sam Farbstein, 4700 W. 95th St., Oak Lawn, IL 60453		22d. 036063034			
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)		NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.			
23.					
BURIAL, CREMATION, REMOVAL (SPECIFY)	CEMETERY OR CREMATORY-NAME	LOCATION CITY OR TOWN STATE	DATE (MONTH, DAY, YEAR)		
24a. Burial	24b. Fairmount-Willow Hills	24c. Willow Springs, Illinois	24d. 06/19/03		
FUNERAL HOME NAME	STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE		ZIP		
25a. Colonial Chapel, 15525 S. 73rd Ave., Orland Park, IL 60462					
FUNERAL DIRECTOR'S SIGNATURE	FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER				
25b. Edward Samanta	25c. 034-010425				
LOCAL REGISTRAR'S SIGNATURE	DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)				
26a. David N. Orr	26b. JUN 17 2003				