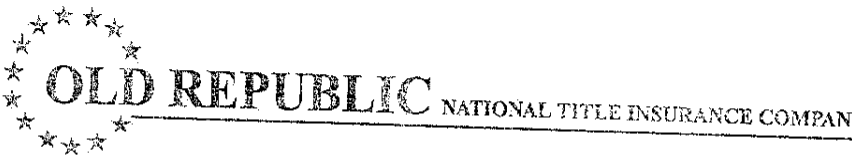




Doc#: 1231834023 Fee: \$64.00  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 11/13/2012 08:55 AM Pg: 1 of 3



1237495 4/10

Old Republic National Title Insurance Company  
20 South Clark Street  
Suite 2000  
Chicago, IL 60603

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS )  
COUNTY OF (Cook) )

SS.

File Number: 1237495

being duly sworn states that FRED ANDREWS resides at 1322 S. MILLARD AVE. in the City of CHICAGO

That FRED ANDREWS was acquainted with JOE HENRY ANDREWS deceased who, at the time of death, was one of the owners of the land in Cook County, IL, described as: 1322 S. MILLARD AVE., CHICAGO, IL 60623

SEE ATTACHED LEGAL

That the deceased died 2-3-10, 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, IL.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of Cook County, IL, about \_\_\_\_\_.

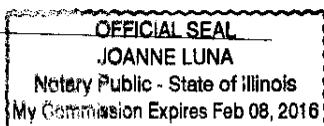
That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of \$ 10<sup>00</sup> dollars.

Affiant makes this affidavit for the purpose of inducing Old Republic National Title Insurance to issue its Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to before me by the said

this 29<sup>th</sup> day of Sept, A.D. 2012.

Joanne Luna  
Notary Public



Joe Henry Andrews  
(Affiant's Signature)

# CERTIFICATION OF DEATH RECORD

## UNOFFICIAL COPY

### CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2010 0012165

DATE ISSUED 11/03/2011

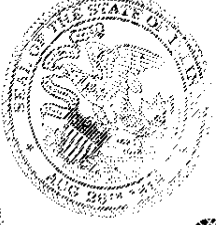
DECEDENT'S LEGAL NAME <b>JOE HENRY ANDREWS</b>		SEX <b>MALE</b>	DATE OF DEATH <b>FEBRUARY 03, 2010</b>	
COUNTY OF DEATH <b>COOK</b>	AGE AT LAST BIRTHDAY <b>62 YEARS</b>	DATE OF BIRTH <b>APRIL 03, 1947</b>		
CITY OR TOWN <b>CHICAGO HEIGHTS</b>		HOSPITAL OR OTHER INSTITUTION NAME <b>ST JAMES HOSPITAL</b>		
PLACE OF DEATH <b>INPATIENT</b>				
BIRTHPLACE <b>GREENWOOD, MS</b>	SOCIAL SECURITY NUMBER <b>[REDACTED]</b>	STATUS AT TIME OF DEATH <b>MARRIED</b>	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME <b>OLIVIA H HAYES</b>	EVER IN U.S. ARMED FORCES? <b>NO</b>
RESIDENCE <b>2039 W 107TH STREET</b>		APT. NO.	CITY OR TOWN <b>HAZEL CREST</b>	INSIDE CITY LIMITS? <b>YES</b>
COUNTY <b>COOK</b>	STATE <b>IL</b>	ZIP CODE <b>60429</b>	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION <b>FRED ANDREWS</b>	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION <b>OLIVIA OWENS</b>
INFORMANT'S NAME <b>OLIVIA H ANDREWS</b>		RELATIONSHIP <b>WIFE</b>	MAILING ADDRESS <b>2039 W 107TH STREET, HAZEL CREST, IL, 60429</b>	
METHOD OF DISPOSITION <b>BURIAL</b>		PLACE OF DISPOSITION <b>MOUNT HOPE CEMETERY</b>	LOCATION - CITY OR TOWN AND STATE <b>CHICAGO, IL</b>	DATE OF DISPOSITION <b>FEBRUARY 12, 2010</b>
FUNERAL HOME <b>WOODS FUNERAL HOME LTD, 1003 SOUTH HALSTED STREET, CHICAGO HEIGHTS, IL, 60411</b>				
FUNERAL DIRECTOR'S NAME <b>MELVIN TYRONE WOODS</b>			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER <b>034015057</b>	
LOCAL REGISTRAR'S NAME <b>ETHEL M TAYLOR</b>			DATE FILED WITH LOCAL REGISTRAR <b>FEBRUARY 11, 2010</b>	
CAUSE OF DEATH PART I. <b>PROSTATE CARCINOMA</b>				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.	Due to (or as a consequence of):	
		b.	Due to (or as a consequence of):	
		c.	Due to (or as a consequence of):	
		Due to (or as a consequence of):		
PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.			WAS AN AUTOPSY PERFORMED? <b>NO</b>	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? <b>N/A</b>	
FEMALE PREGNANCY STATUS <b>NOT APPLICABLE</b>			MANNER OF DEATH <b>NATURAL</b>	
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY		INJURY AT WORK?
LOCATION OF INJURY				
DESCRIBE HOW INJURY OCCURRED:				IF TRANSPORTATION INJURY, SPECIFY:
ATTEND THE DECEASED? <b>YES</b>	DATE LAST SEEN ALIVE <b>FEBRUARY 02, 2010</b>	WAS MEDICAL EXAMINER OR CORONER CONTACTED? <b>NO</b>	DATE PRONOUNCED	TIME OF DEATH <b>12:10 AM</b>
CERTIFIER <b>PHYSICIAN</b>			DATE CERTIFIED <b>FEBRUARY 03, 2010</b>	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH <b>KEMP, ROBERT, 3700 W 201ST STREET, OLYMPIA FIELDS, ILLINOIS, 60461</b>				PHYSICIAN'S LICENSE NUMBER <b>036086262</b>

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: FACILE SECURITY/HOLOGRAPHIC FOLDS AT BOTTOM

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

*David Orr*  
David Orr  
Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

# UNOFFICIAL COPY

## LEGAL DESCRIPTION

LOT 30 IN BLOCK 3 IN VANCE AND PHILLIPS' BOULEVARD ADDITION IN THE NORTHWEST  
1/4 OF SECTION 23, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL  
MERIDIAN, IN COOK COUNTY, ILLINOIS.

Address commonly known as:  
1322 South Millard Avenue  
Chicago, IL 60623

PIN#: 16-23-112-021-0000

Property of Cook County Clerk's Office