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Doc#: 1303234005 Fee: \$68.00
Karen A. Yarbrough RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 02/01/2013 08:21 AM Pg: 1 of 4

Return to and Prepared by
Chicago Title ServiceLink Division
4000 Industrial Blvd
Aliquippa, PA 15001
#22853797

Deceased Joint Tenancy Affidavit

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Title No.: 22853796

LEGAL DESCRIPTION

EXHIBIT "A"

THE LAND REFERRED TO HEREIN BELOW IS SITUATED IN THE COUNTY OF **COOK**, STATE OF ILLINOIS AND IS DESCRIBED AS FOLLOWS:

ALL THAT PARCEL OF LAND IN COOK COUNTY, STATE OF ILLINOIS, AS DESCRIBED IN DEED DOC # 03016117, ID# 13-32-316-019, BEING KNOWN AND DESIGNATED AS:

LOT 5 (EXCEPT THE NORTH 6 FEET 3 INCHES) AND THE NORTH 1/2 OF LOT 6 IN BLOCK 7 IN GALE AND WELCHS RESUBDIVISION OF BLOCKS 27 TO 1 AND 46 TO 50 IN A. GALES SUBDIVISION OF THE SOUTHEAST 1/4 OF SECTION 31 AND THE SOUTHWEST 1/4 OF SECTION 32, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, FILED IN PLAT DOC # 228461, RECORDED 07/08/1908, IN COOK COUNTY, ILLINOIS.

MORE COMMONLY KNOWN AS 1642 N. MERRIMAC AVE., CHICAGO, IL 60639

BY FEE SIMPLE DEED FROM FREDDIE DAVIS AKA FRED DAVIS, MARRIED TO JACQUELINE DAVIS AS SET FORTH IN DOC # 03016117 DATED 12/01/1993 AND RECORDED 12/13/1993, COOK COUNTY RECORDS, STATE OF ILLINOIS.

Property of Cook County Clerk's Office

CERTIFICATION OF DEATH RECORD

UNOFFICIAL COPY


COOK COUNTY CLERK VITAL RECORDS CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2009 0069068

DATE ISSUED 11/5/2012

DECEDENT'S LEGAL NAME PHYLLIS JORDAN			SEX FEMALE	DATE OF DEATH SEPTEMBER 16, 2009																		
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 50 YEARS	DATE OF BIRTH APRIL 13, 1959																			
CITY OR TOWN CHICAGO			HOSPITAL OR OTHER INSTITUTION NAME 1642 N MERRIMAC																			
PLACE OF DEATH DECEDENT'S HOME																						
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED] 6246	STATUS AT TIME OF DEATH MARRIED		SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME ALFRED JORDAN	EVER IN U.S. ARMED FORCES? NO																	
RESIDENCE 1642 N MERRIMAC		APT. NO.	CITY OR TOWN CHICAGO		INSIDE CITY LIMITS? YES																	
COUNTY COOK	STATE IL	ZIP CODE 60639	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION EDDIE JONES		MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION THELMA WATSON																	
INFORMANT'S NAME ALFRED JORDAN		RELATIONSHIP HUSBAND		MAILING ADDRESS 1642 N MERRIMAC, CHICAGO, IL, 60639																		
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION OAK RIDGE CEMETERY		LOCATION - CITY OR TOWN AND STATE HILLSIDE, IL	DATE OF DISPOSITION SEPTEMBER 19, 2009																	
FUNERAL HOME DOVES FUNERAL HOME, 5744 W NORTH AVE, CHICAGO, IL, 60639																						
FUNERAL DIRECTOR'S NAME MICHELLE GHOLSTON				FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015996																		
LOCAL REGISTRAR'S NAME DAVID ORR				DATE FILED WITH LOCAL REGISTRAR SEPTEMBER 23, 2009																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="4" style="width: 15%; vertical-align: top;"> CAUSE OF DEATH IMMEDIATE CAUSE <small>(Final disease or condition resulting in death)</small> </td> <td style="width: 10%; text-align: center;">PART I.</td> <td style="width: 55%;">MULTIPLE SCLEROSIS</td> <td style="width: 10%;"></td> <td style="width: 10%; text-align: center;">MONTHS</td> </tr> <tr> <td style="text-align: center;">a.</td> <td>Due to (or as a consequence of):</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Due to (or as a consequence of):</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Due to (or as a consequence of):</td> <td></td> <td></td> </tr> </table>						CAUSE OF DEATH IMMEDIATE CAUSE <small>(Final disease or condition resulting in death)</small>	PART I.	MULTIPLE SCLEROSIS		MONTHS	a.	Due to (or as a consequence of):			b.	Due to (or as a consequence of):			c.	Due to (or as a consequence of):		
CAUSE OF DEATH IMMEDIATE CAUSE <small>(Final disease or condition resulting in death)</small>	PART I.	MULTIPLE SCLEROSIS		MONTHS																		
	a.	Due to (or as a consequence of):																				
	b.	Due to (or as a consequence of):																				
	c.	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																		
FEMALE PREGNANCY STATUS NOT PREGNANT WITHIN LAST YEAR				MANNER OF DEATH NATURAL																		
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY		INJURY AT WORK?																		
LOCATION OF INJURY				IF TRANSPORTATION INJURY, SPECIFY:																		
DESCRIBE HOW INJURY OCCURRED:																						
ATTEND THE DECEASED? NO	DATE LAST SEEN ALIVE UNKNOWN	WAS MEDICAL EXAMINER OR CORONER CONTACTED? UNKNOWN	DATE PRONOUNCED	TIME OF DEATH 08:18 PM																		
CERTIFIER PHYSICIAN				DATE CERTIFIED SEPTEMBER 17, 2009																		
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH RICHARD SHAPIRO, 1340 S DAMEN AVE, CHICAGO, ILLINOIS, 60601				PHYSICIAN'S LICENSE NUMBER 036030462																		

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
 Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE