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Doc#: 1414145039 Fee: \$42.00
RHSP Fee: \$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 05/21/2014 10:41 AM Pg: 1 of 3

JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS)
) SS
COUNTY OF COOK)

ROBERT P. SMITH., hereby referred to as the affiant, states under oath that the affiant resides at 16655 S. Kimbark Ave., South Holland, IL 60473; that the affiant was acquainted with DAISY SMITH; at the time of the decedent's death, the decedent was one of the owners of a parcel of property by virtue of a properly recorded joint tenancy or tenancy by the entirety deed, said property located in Cook County, Illinois, and legally described as follows:

Lot 50 in Block 3 in Oakwood Subdivision of the North ½ of the South ½ of the North East ¼ of Section 22, Township 38 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois

Permanent Index Number: 20-22-218-044-0000
Property Address: 6501 S. Eberhart Ave, Chicago, IL 60637

The decedent died on December 16, 2012, as evidenced by the attached death certificate;

The decedent had no interest in any business or partnership, nor held any power of appointment at death, nor created any remainder interests in property by transfer with retention of a life interest therein or the creation of interests to take effect in possession or enjoyment after death;

The total value of decedent's estate, including the taxable interest in the above property, is no taxable estate, and that the value of the above property individually is no taxable estate;;

The State Estate/Inheritance Tax and the Federal Estate Tax, if any, that was due from the decedent's estate, has been paid in full;

~~The affiant makes this affidavit to induce Attorneys' Title Guaranty Fund, Inc. (ATG) to issue its policy of title insurance on the above described property.~~

~~The affiant hereby covenants and agrees, individually, and for the affiants, heirs, personal representatives or assignees, to forever fully indemnify, protect, defend and hold ATG harmless and to reimburse ATG for all loss, costs, damages, suits, attorney's fees and expenses of every kind and nature that ATG may suffer, expend or incur by reason of the issuance of said policy free and clear of the following objections:~~

- ~~1. Claims against the estate of DAISY SMITH, deceased, the decedent;~~
- ~~2. State Estate/Inheritance Tax and Federal Estate Tax that may be charged against the estate of said decedent;~~
- ~~3. Legacies, if any, created by the will of said decedent;~~
- ~~4. Rights of contribution.~~

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JOINT TENANCY AFFIDAVIT

(continued)

Robert P. Smith

ROBERT P. SMITH.

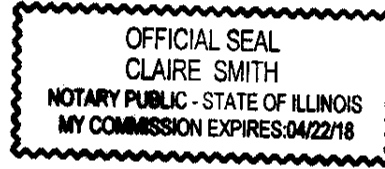
Subscribed and sworn to before me this

20th day of May, 2014
(Month) (Year)

Claire Smith

(Notary Public)

My commission expires: 4-22-2018



Note: If the decedent left a will, a certified copy thereof must be presented to ATG for inspection, along with a certified copy of the death certificate and evidence of payment of death taxes, if any.

This instrument prepared by:
Christopher J. Cummings
Cummings & Duda, Ltd.
2024 Hickory Road, Suite 205
Homewood, IL 60430,

Return to:
Christopher J. Cummings
Cummings & Duda, Ltd.
2024 Hickory Road, Suite 205
Homewood, IL 60430,

Property of Cook County Clerk's Office

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

STATE FILE NUMBER 2012 0096980

DATE ISSUED 1/3/2013

DECEDENT'S LEGAL NAME DAISY A SMITH		SEX FEMALE	DATE OF DEATH DECEMBER 16, 2012	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 72 YEARS	DATE OF BIRTH OCTOBER 04, 1940		
CITY OR TOWN CHICAGO	HOSPITAL OR OTHER INSTITUTION NAME NORTHWESTERN MEMORIAL HOSPITAL			
PLACE OF DEATH INPATIENT				
BIRTHPLACE SALEM, AL	SOCIAL SECURITY NUMBER [REDACTED]	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME ROBERT P SMITH	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 16655 KIMBARK AVE	APT. NO.	CITY OR TOWN SOUTH HOLLAND	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60473	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JEANNIE SCOTT	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION DAISY MAE SMITH
INFORMANT'S NAME TAFFENER SMITH	RELATIONSHIP DAUGHTER	MAILING ADDRESS 16655 KIMBARK, SOUTH HOLLAND, IL, 60473		
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION MOUNT HOPE CEMETERY	LOCATION - CITY OR TOWN AND STATE CHICAGO, IL	DATE OF DISPOSITION DECEMBER 22, 2012	
FUNERAL HOME DOTY NASH FUNERAL HOME LTD., 8620 S STONY ISLAND AV, CHICAGO, IL, 60617				
FUNERAL DIRECTOR'S NAME MARCUS G HUDSON		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014818		
LOCAL REGISTRAR'S NAME DAVID ORR		DATE FILED WITH LOCAL REGISTRAR DECEMBER 28, 2012		
CAUSE OF DEATH	PART I. GASTRIC CANCER			
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):		
PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.				
FEMALE PREGNANCY STATUS NOT APPLICABLE		WAS AN AUTOPSY PERFORMED? YES		
		WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? NO		
		MANNER OF DEATH NATURAL		
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? YES	DATE LAST SEEN ALIVE DECEMBER 16, 2012	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 08:30 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED DECEMBER 16, 2012	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH KATHY JOHNSON NEELY, NORTHWESTERN MEMORIAL, 251 E HURON, CHICAGO, ILLINOIS, 60611			PHYSICIAN'S LICENSE NUMBER 036068543	

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



THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: FACILE SECURITY/HOLOGRAPHIC FOILS AT BOTTOM