

# UNOFFICIAL COPY

STATE OF ILLINOIS )  
 ) SS  
COUNTY OF COOK )



Doc#: 1600619018 Fee: \$42.00  
RHSP Fee:\$9.00 RPRF Fee: \$1.00  
Karen A. Yarbrough  
Cook County Recorder of Deeds  
Date: 01/06/2016 09:34 AM Pg: 1 of 3

## DECEASED JOINT TENANCY AFFIDAVIT

**GENE CHANDLER**, being duly sworn states that he resides at 438 E. 75<sup>th</sup> Street, Chicago, IL 60619.

That she was acquainted with **LILLIE KINNARD**, DECEASED, WHO AT THE TIME OF HER DEATH, was one of the owners of the land in Cook County, Illinois described as:

### SEE EXHIBIT A ATTACHED HERETO AND MADE A PART HEREOF

That the deceased died on MAY 27 2013, as evidenced by a certified copy of the 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 on or about \_\_\_\_\_.

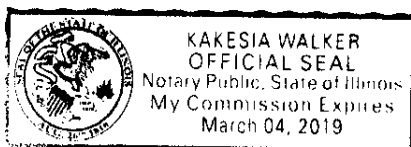
That the total value of the estate of the deceased, including both real and personal property owned by the deceased whether individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of \$ 100,000.00.

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

Subscribed and Sworn to before me by the said  
19, October, 2015

*Kakesia Walker*  
Notary Public

*Gene Chandler*  
GENE CHANDLER



Prepared By:  
Hyland Legal  
10020 S. Western  
Chicago IL 60643

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## EXHIBIT A LEGALDESCRIPTION

**PARCEL 1:** LOT 20 (EXCEPT THE NORTH 4 FEET THEREOF) IN BLOCK 4 IN WAKEFORD'S FIFTH ADDITION, BEING BENJAMIN F. CRAWFORD'S SUBDIVISION OF THE EAST 503 FEET OF THE WEST  $\frac{1}{2}$  OF THE SOUTHEAST  $\frac{1}{4}$  (LYING NORTH OF THE SOUTH 90 RODS THEREOF) OF SECTION 27, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

**PARCEL 2:** THE NORTH 8 FEET OF LOT 8 IN BLOCK 1 IN SUBDIVISION OF BLOCKS 1, 2, 7, AND 8 IN HELM AND HAWES SUBDIVISION OF THE NORTH 15 ACRES AND THE SOUTH 45 ACRES OF THE WEST  $\frac{1}{2}$  OF THE SOUTHEAST  $\frac{1}{4}$  OF SECTION 27, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

P.I.N(S): 20-27-411-016-0000/20-27-411-017-0000

COMMONLY KNOWN AS: 7647 S. RHODES AVENUE, CHICAGO, IL 60619.

Property of Cook County Clerk's Office

**UNOFFICIAL COPY**

**CITY OF CHICAGO HEIGHTS  
CHICAGO HEIGHTS, ILLINOIS  
MEDICAL CERTIFICATE OF DEATH**

STATE FILE NUMBER 2013 0042062

DATE ISSUED 5/30/2013

DECEDENT'S LEGAL NAME LILLIE J KENNARD CHANDLER		SEX FEMALE	DATE OF DEATH MAY 27, 2013	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 72 YEARS	DATE OF BIRTH APRIL 02, 1941		
CITY OR TOWN CHICAGO HEIGHTS		HOSPITAL OR OTHER INSTITUTION NAME VITAS HOSPICE AT FRANCISCAN ST JAMES HOSPITAL		
PLACE OF DEATH HOSPICE FACILITY				
BIRTH-PLACE HOLLY SPRINGS, MS	SOCIAL SECURITY NUMBER [REDACTED] 692	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME GENE CHANDLER	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 3110 LONDON DRIVE	APT. NO. .	CITY OR TOWN OLYMPIA FIELDS		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION EARNEST JORDAN SR	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION PAULINE MOODY	
INFORMANT'S NAME GENE CHANDLER		RELATIONSHIP HUSBAND	MAILING ADDRESS 3110 LONDON DRIVE, OLYMPIA FIELDS, IL, 60461	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION HOLY SEPULCHRE CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE ALSIP, IL	DATE OF DISPOSITION MAY 31, 2013	
FUNERAL HOME GATLING'S CHAPEL INC, 10133 S HALSTED ST, CHICAGO, IL, 60628				
FUNERAL DIRECTOR'S NAME MARGUERITE GATLING			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014380	
LOCAL REGISTRAR'S NAME LORI WILCOX			DATE FILED WITH LOCAL REGISTRAR MAY 30, 2013	
<b>CAUSE OF DEATH</b> PART I. CONGESTIVE HEART FAILURE				
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 <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 APPLICABLE			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 MAY 27, 2013	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 09:30 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED MAY 29, 2013	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR M LONGI, 30 E 15TH STREET, CHICAGO HEIGHTS, ILLINOIS			PHYSICIAN'S LICENSE NUMBER 036089100	

21506

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.

DATE ISSUED: MAY 30 2013

*Joni Dula*  
City Clerk

