UNOFFICIAL COPY

DECEASED JOINT TENANCY AFFIDAVIT

Toni A. Helton, surviving tenant by the entirety of Lukie J. Helton, being duly sworn states that she resides at 312 Whitewood Drive Streamwood, Illinois 60107

TONI A. HELTON was married to Lukie J. Helton who at the time of his death, was one of the owners of the land in Cook County, Illinois. regally described as:



Doc#: 1606939042 Fee: \$64.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds
Date: 03/09/2016 02:59 PM Pg: 1 of 3

FOR RECORDER'S USE ONLY

THE NORTH 44.50 FEET OF LOT 64 IN BLOCK 3 IN STREAMWOOD GREEN UNIT FIVE, BEING A SUBDIVISION OF PART OF DUE EAST ½ OF THE NORTHWEST ¼ OF SECTION 24, TOWNSHIP 41 NORTH, RANGE 9, EAST OF THE THIRD PRINCIPAL MERIDIAN. IN COOK COUNTY, ILLINOIS.

Permanent Real Estate Index Number(s): 06-24-112-09/

Address of Real Estate:

312 Whitewood Drive, Strenawood, IL 60107

The deceased died May 6, 2010 a copy of a death certificate is attached hereto and made a part hereof.

The deceased	died:	0,
	Leaving no Last Will & Testament.	0,50
	Leaving a Last Will & Testament, a copy of which is a original of the unproven will should be filed with the Division of the Circuit Court of Cook County, Illinois.	Clerk of the Probate
X.	Leaving a Last Will & Testament that was filed in the U the Probate Division of the Circuit Court of Cook C about	•
	· · ·	

CONLA. HELTON

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1606939042 Page: 2 of 3

UNOFFICIAL COPY

Subscribed and sworn to before me this day of November 2015.

Notary Public

OFFICIAL SEAL JENNIFER A ZITKO

This instrument prepared by:

Janet Willerman Ellingson Attorney at Law 1250 Larkin Avenue Suite 220 Elgin, Illinois 60123

Send subsequent tax bills to:

Mrs. Toni A. Helton 312 Whitewood Drive Streamwood, IL 60107 Return to:

Janet Willerman Ellingson White animood. Attorney at Law 1250 Larkin Avenue Elgin, Illinois 60123

1606939042 Page: 3 of 3

CENTIFICATION OF IVENTER THE PROPERTY OF THE P

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

TATE FILE NUMBER 2010 0033750)							DATE	ISSUED	2/16/20
DECEDENT'S LEGAL NAME						SEX MALE		OF DEATH Y 06, 2010)	
LUKIE J HELTON					TE OF B	RTH				
COOK	77 YE	AST BIRTHDAY ARS			MARC	H 26, 1933				
CITY OR TOWN			HOSPITAL OR	OTHER INST EXIUS ME	ITUTION DICAL	NAME CENTER				
HOFFMAN ESTATES			JAIN AL	LXIOO ML		<u> </u>	···			
PLACE OF DEATH INPATIENT									Teveniku	I.S. ARMED
BIRTHPLACE SOC		STATUS AT TIM	NE OF DEATH	I		SE/CIVIL UNION PA	RTNER'S MA	IDEN NAME	FORCES?	
MC CAYSVILLE, GA	9882	MARRIED	NO T	CITY OR TO		VVOLETER		ir	NSIDE CITY	LIMITS?
RESIDENCE 312 WHITEWOOD DRIVE				STREAM		D			YES	5100 W 1 1 1 1 1 1 C 1
COUNTY STATE		PARENT'S NAME F	PRIOR TO FIRST MA	RRIAGE/CIVIL U	NON	MOTHER/CO-PAI JULIE FO	RENT'S NAME RTNER	PRIOR TO FIF	RST MARRIAG	E/CIVIL UNION
INFORMANT'S NAME TONI ANN HELTON	RELATIONSHIP MAILING ADDRESS WIFE 312 WHITEWOOD DRIVE, S'					STREAM	FREAMWOOD, IL. 60107			
METHOD OF DISPOSITION	PLACE OF DISPO			LOCAT	ION - CIT	Y OR TOWN A	D STATE		DISPOSITIO	N
CREMATION	IDE CREMA	MATORY BARTLETT,			IL	MAY 1	MAY 12, 2010			
FUNERAL HOME	OME STAID SAIL	REENMEA	DOWS BLV). STREAM	OOW	D, IL, 60107				
FUNERAL DIRECTOR'S NAME							FOR'S ILLINOIS LICENSE NUMBER			
PHILOMENA TANCREDI DATE FILED WIT							H LOCAL REGISTRAR			
DAVID ORR),			MAY 10	, 2010			
0.1.00	ULTIORGAN FAILURE		τ_{\sim}				<u>بن</u>	ATH UNK	NOWN	UNKNO\
IMMEDIATE CAUSE (Final disease or condition		Due to	(or as a onsequence	e of):				BETTV ID DE		
resulting in death) b. FA	AILURE TO THRIVE		0				PPRO)	RVAL FI AN	KNOWN	UNKNO
			(or as a consequence	e of				ONS		
c. D	YSPHAGIA CORONAR	Y ARTERY DIS	SEASE	12				UNF	KNOWN	UNKNO
_			(or as a consequenc							
PART II. Enter other significant condition	ns contributing to death	but not resulting i	n the underlying o	cause given in	PALTI		WAS AN AL	JTOPSY PER	FORMED?	NO
						0//	WERE AUT COMPLETE	OPSY FINDII CAUSE OF	NGS USED T DEATH? N	ro I/ A
FEMALE PREGNANCY STATUS						7	MANNER O			
	NOT APPLICABLE DATE OF INJURY TIME OF INJURY		PLACE OF INJURY					INJURY	AT WORK?	
DATE OF INJURY	TANKE OF A							×C	_	
LOCATION OF INJURY										
DESCRIBE HOW INJURY OCCURRED:							IF	TRANSPORT	TATION INJU	JRY, SPECII
ATTEMO THE DEGENOES.	E LAST SEEN ALIVE AY 06, 2010		AL EXAMINER OF ONTACTED?		DATE	PRONOUNCED			TIME OF 11:20	
CERTIFIER							D.	ATE CERTIF MAY 06,		
PHYSICIAN NAME ADDRESS AND ZIP CODE OF P	ERSON COMPLETING CA	USE OF DEATH						PHYSICIAN	N'S LICENSE	NUMBER
RICHA SRIVASTAVA, 800 B	IESTERFIELD ROA	D, ELK GRO	VE VILLAGE	LLINOIS	, 6000	7		03610)7477	



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.



Cook County Clerk

