



Doc#: 1607546030 Fee: \$40.00  
RHSP Fee:\$9.00 RPRF Fee: \$1.00  
Karen A. Yarbrough  
Cook County Recorder of Deeds  
Date: 03/15/2016 11:29 AM Pg: 1 of 2

**DECEASED  
JOINT TENANCY  
AFFIDAVIT**

State of Illinois )  
) SS

County of Cook )

**Edward J. Smith** hereinafter called Affiant(s) being duly sworn states that he resides at: **12401 Melvina Avenue, Palos Heights, IL 60463** That Affiant(s) was acquainted with Marilyn Smith a/k/a Mari Lynn S. Smith, hereinafter referred to as Deceased, and at the time of Decedent's death, was one of the owners of the land in Cook County, Illinois, described as:

**LOT 13 IN KETELAAR BROTHERS DEVELOPMENT, BEING A RESUBDIVISION OF PART OF THE NORTHWEST ¼ OF THE SOUTHWEST ¼ OF SECTION 29, TOWNSHIP 37 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.**

Permanent Real Estate Index Number: 24-29-317-001-0000

That the Deceased died on January 4, 2012, as evidenced by a copy of Deceased's death certificate attached hereto.

That the Deceased, at the time of his death, held his share of the above-mentioned property as a joint tenant and that the Deceased died leaving no last will & testament.

That the total value of the estate of the Deceased, for estate tax purposes, 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 \$500.00.

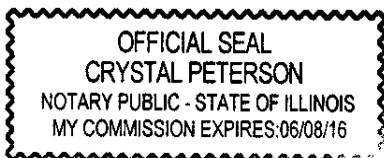
Affiant makes this affidavit for the purpose of any individual or corporation who may be harmed by the Affiant's lack of veracity.

Subscribed and sworn before me  
this 15<sup>th</sup> day of December, 2015.

Crystal Peterson  
Crystal Peterson

Edward J. Smith  
Affiant's Signature  
Edward J. Smith

Commission Expires: 06/08/2016



UNOFFICIAL COPY

David Orr

David Orr

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.



NOTE: TACTILE SECURITY HOLOGRAPHIC FOILS AT BOTTOM

THE WORD VOID APPEARS WHEN PHOTOCOPIED

DECEASED'S LEGAL NAME MARILYNN SMITH		SEX FEMALE	DATE OF DEATH JANUARY 04 2012
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 68 YEARS	DATE OF BIRTH DECEMBER 09 1943
CITY OR TOWN PALOS HEIGHTS		HOSPITAL OR OTHER INSTITUTION NAME PALOS COMMUNITY HOSPITAL	
PLACE OF DEATH EMERGENCY ROOM / OUTPATIENT			
BIRTHPLACE ROSEN, IL	SOCIAL SECURITY NUMBER [REDACTED]	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE-CIVIL UNION PARTNER'S MAIDEN NAME EDWARD SMITH
RESIDENCE 12401 MELVINA	CITY OR TOWN PALOS HEIGHTS	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60463	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JOHN KICMAL
INFANT'S NAME EDWARD SMITH	RELATIONSHIP HUSBAND	MALING ADDRESS 12401 MELVINA, PALOS HEIGHTS, IL 60463	
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION HOLY SEPULCHRE CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE ALSP, IL
FUNERAL HOME JOHN SHEEHY AND SONS FUNERAL HOME, 7020 W 127TH STREET, PALOS HEIGHTS, IL 60463		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 031007831	DATE FILED WITH LOCAL REGISTRAR JANUARY 10 2012
LOCAL REGISTRAR'S NAME DAVID ORR			
CAUSE OF DEATH			
PART I: ACUTE MYOCARDIAL INFARCTION			
IMMEDIATE CAUSE a. ANOXIC ENCEPHALOPATHY			
Due to (or as a consequence of)			
b. ASPIRATION PNEUMONIA			
Due to (or as a consequence of)			
c. [REDACTED]			
Due to (or as a consequence of)			
d. [REDACTED]			
Due to (or as a consequence of)			
e. [REDACTED]			
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in Part I.			
WAS AN AUTOPSY PERFORMED? UNKNOWN			
WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? UNKNOWN			
MANNER OF DEATH NATURAL			
DATE OF INJURY		TIME OF INJURY	PLACE OF INJURY
FEMALE PREGNANCY STATUS NOT PREGNANT WITHIN LAST YEAR		INJURY AT WORK?	
LOCATION OF INJURY			
DESCRIBE HOW INJURY OCCURRED			
ATTEND THE DECEASED? YES		DATE LAST SEEN ALIVE JANUARY 04 2012	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES
DATE CERTIFIED JANUARY 05 2012		DATE PRONOUNCED	TIME OF DEATH 03:10 PM
PHYSICIAN		NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH A. M. SHAHBAIN M.D., 12508 SOUTH HARLEM, PALOS HEIGHTS, ILLINOIS, 60463	
CERTIFIER		PHYSICIAN'S LICENSE NUMBER 036085113	

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

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

STATE FILE NUMBER 2012 0001696

DATE ISSUED 01/13/2012

CERTIFICATION OF DEATH RECORD