

# UNOFFICIAL COPY

## DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS )  
COUNTY OF KANE ) SS.

**DARLENE DIANE LEWIS**, being duly sworn states that she resides at 1168 Clover Hill Lane, Elgin, Illinois 60120.

That she was acquainted with **FRANK M. LEWIS**, who, at the time of his death, was her husband and one of the owners of the land in Cook County, Illinois, commonly known as 1168 Clover Hill Lane, Elgin, Illinois 60120. The legal description for said property is as follows: PN # 06-07-220-003-0000

**LOT 55 AT PRINCETON WEST PHASE 1, BEING A SUBDIVISION OF PART OF THE EAST 1/2 OF FRACTIONAL SECTION 6 AND THE NORTHEAST 1/4 OF FRACTIONAL SECTION 7, TOWNSHIP 41 NORTH, RANGE 9, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED NOVEMBER 21, 2003 AS DOCUMENT 0332534090, IN COOK COUNTY, ILLINOIS.**

That the deceased died on AUGUST 2, 2014, as evidenced by a certified copy of a death certificate of the deceased attached hereto.

That the deceased died (choose one):

- leaving no Last Will & Testament.  
 leaving a Last Will and 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 \_\_\_\_\_ County, Illinois.  
 leaving a Last Will and Testament that was filed in the Unproven Will Box of the Probate Division of the Circuit Court of \_\_\_\_\_ 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 either individually, in joint tenancy or tenancy by the entirety at the time of the death of the deceased, does not exceed the sum of \$ 1.2 MILLION.

Affiant makes this affidavit for the purpose of transferring the above real estate to her revocable living trust.

Subscribed and sworn to before me this 13<sup>th</sup> day of SEPTEMBER, 2016.

Darlene Lewis  
**DARLENE D. LEWIS**

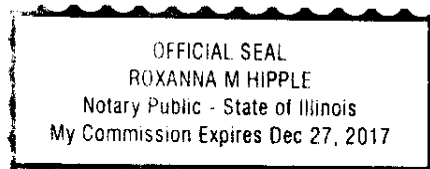
I, the undersigned, a Notary Public in and for said County, in the State aforesaid, CERTIFY THAT **DARLENE D. LEWIS**, personally known to me to be the same person(s) whose name(s) are subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that they signed, sealed and delivered the instrument as their free and voluntary act, for the uses and purposes therein set forth.

Given under my hand and notarial seal this 13 day of Sept, 2016.



Doc#: 1626349069 Fee: \$60.00  
RHSP Fee: \$9.00 RPRF Fee: \$1.00  
Karen A. Yarbrough  
Cook County Recorder of Deeds  
Date: 09/19/2016 11:16 AM Pg: 1 of 2

[Signature]  
Notary Public



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

STATE FILE NUMBER 2014 0059443

MEDICAL EXAMINER'S CASE NUMBER 023 AUG 14

DATE ISSUED 9/19/2016

DECEDENT'S LEGAL NAME FRANK M LEWIS		SEX MALE	DATE OF DEATH AUGUST 02, 2014	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 80 YEARS	DATE OF BIRTH OCTOBER 15, 1933		
CITY OR TOWN ELGIN	HOSPITAL OR OTHER INSTITUTION NAME 1168 CLOVER HILL LANE			
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED]-4241	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME DARLENE BUTLER	EVER IN U.S. ARMED FORCES? YES
RESIDENCE 1168 CLOVER HILL LANE	APT. NO.	CITY OR TOWN ELGIN	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60120	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ALLEN LEWIS	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION DORIS CANTOR
INFORMANT'S NAME DARLENE LEWIS		RELATIONSHIP WIFE	MAILING ADDRESS 1168 CLOVER HILL LANE, ELGIN, IL, 60120	
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION TWIN PINES CREMATORY	LOCATION - CITY OR TOWN AND STATE EAST DUNDEE, IL	DATE OF DISPOSITION AUGUST 06, 2014
FUNERAL HOME WAIT ROSS ALLANSON FUNERAL & CREMATION SERVICES, 51 CENTER ST., ELGIN, IL, 60120				
FUNERAL DIRECTOR'S NAME COREY M SHORT			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014867	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR AUGUST 7, 2014	
<b>CAUSE OF DEATH</b> PART I. GUNSHOT WOUND OF THE HEAD				
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 <b>significant conditions contributing to death</b> but not resulting in the underlying cause given in PART I.			WAS AN AUTOPSY PERFORMED? YES	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? YES	
FEMALE PREGNANCY STATUS NOT APPLICABLE			MANNER OF DEATH SUICIDE	
DATE OF INJURY AUGUST 2, 2014	TIME OF INJURY 03:27 AM	PLACE OF INJURY HOME	INJURY AT WORK? NO	
LOCATION OF INJURY 1168 CLOVER HILL LANE, ELGIN, IL, 60120				
DESCRIBE HOW INJURY OCCURRED: SELF INFLICTED			IF TRANSPORTATION INJURY, SPECIFY:	
ATTEND THE DECEASED?	DATE LAST SEEN ALIVE	WAS MEDICAL EXAMINER OR CORONER CONTACTED?	DATE PRONOUNCED AUGUST 02, 2014	TIME OF DEATH 03:56 AM
CERTIFIER MEDICAL EXAMINER/CORONER			DATE CERTIFIED AUGUST 07, 2014	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH STEPHEN J CINA MD, 2121 W HARRISON ST, CHICAGO, IL, 60612			PHYSICIAN'S LICENSE NUMBER	

APPROXIMATE  
INTERVAL BETWEEN  
ONSET AND DEATH

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**

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM