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State of Illinois)
County of Cook) ss



Doc# 1627434077 Fee \$40.00
RHSP Fee:\$9.00RPRF Fee \$1.00
Karen A.Yarbrough
Cook County Recorder of Deeds
Date: 09/30/2016 02:38 PM Pg: 1 of 2

JAMES ALLEN FRANKLIN
Decedent

20-33-122-032-0000
P.I.N. Number

8228 S. Emerald Avenue
Chicago, IL 60620-1916
Common Street Address

DECEASED JOINT TENANCY AFFIDAVIT

ETHEL FRANKLIN, hereinafter referred to as the affiant, deposes and states that the affiant resides at: 2812 West 86th Street, Chicago, IL 60652; and that she is the spouse of decedent; that the decedent at the time of his death was one of the owners in joint tenancy, with his wife and surviving spouse, ETHEL FRANKLIN, of the property in Cook County, Illinois, legally described as follows:


LOT 11 IN WILLIAM KRUEGER'S SUBDIVISION OF PART OF LOT 1 & ALL OF LOTS 2 & 3 IN THE SUBDIVISION OF LOT 2 OF THAT PART OF THE SOUTH 60 ACRES OF THE NORTHWEST 1/4 OF SECTION 33, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING WEST OF THE CHICAGO, ROCK ISLAND & PACIFIC RAILROAD, IN COOK COUNTY, ILLINOIS

That said decedent died on November 16, 2015, leaving a last will and testament. That the total value of the estate of said decedent including his taxable interest in the above real property is zero. That no Illinois Inheritance Tax nor Federal Estate Tax, was due from the decedent's estate.



ETHEL FRANKLIN, Affiant

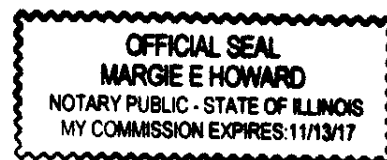
Subscribed and Sworn to before me
this 9th day of September, 2016



Notary Public

AFTER RECORDING, MAIL TO:

DANIEL W. KRAUSE, ESQ.
5533 W. 109th Street, Suite #207
Oak Lawn, IL 60453



CCRD REVIEW 

UNOFFICIAL COPY**CERTIFICATION OF DEATH RECORD**

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2015 0093574

DATE ISSUED 3/17/2016

DECEDENT'S LEGAL NAME JAMES ALLEN FRANKLIN		SEX MALE	DATE OF DEATH NOVEMBER 16, 2015	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 84 YEARS	DATE OF BIRTH APRIL 16 1931		
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME VA JESSE BROWN MEDICAL CENTER		
PLACE OF DEATH INPATIENT				
BIRTHPLACE BREWTON, AL	SOCIAL SECURITY NUMBER 418-34-8625	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME ETHEL MANUEL	EVER IN U.S. ARMED FORCES? YES
RESIDENCE 2812 W 86TH STREET	APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60652	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION CHARLIE CROLEY	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ANNIE LEE CARGO
INFORMANT'S NAME ETHEL FRANKLIN		RELATIONSHIP WIFE	MAILING ADDRESS 2812 W 86TH STREET, CHICAGO, IL, 60652	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION ABRAHAM LINCOLN NATIONAL CEMETERY	LOCATION - CITY OR TOWN AND STATE ELWOOD, IL	DATE OF DISPOSITION DECEMBER 04, 2015	
FUNERAL HOME GATLING'S CHAPEL INC, 10133 S HALSTED ST CHICAGO, IL 60628				
FUNERAL DIRECTOR'S NAME BRIDGETTE D BROWN-WRIGHT			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014948	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR DECEMBER 1, 2015	
CAUSE OF DEATH PART I METASTATIC CANCER				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		Due to (or as a consequence of)		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
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			WAS AN AUTOPSY PERFORMED? YES	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? YES	
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 NOVEMBER 16, 2015	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 04:03 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED NOVEMBER 23, 2015	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR ANDREW DAVIS, 820 DAMEN AVE, CHICAGO, ILLINOIS 60612			PHYSICIAN'S LICENSE NUMBER 125065311	

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: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM