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Doc# 1702515116 Fee \$66.25

RHSP FEE: \$9.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 01/25/2017 03:33 PM PG: 1 OF 3

Prepared by:

Kimberly Vereb, Esq. 1174 Red Dunes Run Avon, IN 46123 IL Bar ID No. 6244816

Return to:

Title Source, Inc. 662 Woodward Avenue Detroit, MI 48226

Record 1st

State of Illine's County of Coo DECEASED JOINT TENANT AFFIDAVIT OF DEATH

(20 20 30 0 0 order No. 62620430

Affiant, ESTEREE FRAZIER-PALMORE, a/k/a ESTEREE PALMORE, being duly sworn, states that she resides at \$340 South Vernon Avenue, Chicago, IL 60619. That she was acquainted with RUFUS PALMORE, Deceased, who at the time of his death was one of the owners of the land described and referred to herein, located in Cook County, Illinois, and described as:

See Exhibit A attached here to and made a part hereof

	That the deceased died February 1, 2017, as evidenced	by a certified copy of the death certificate of			
the dec	eased attached hereto.	When Recorded Return to:			
That the	e deceased died:	Indecomm Global Services As Recording Agent Only			
X	Leaving no Last Will & Testament.	1260 Energy Lane St. Paul, MN 55108			
	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 of the Circuit Court of Cook County, Illinois about	e Unproved Will Box of the Probate Division			

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

Affiant makes this affidavit for that purpose of inducing the Fidelity National Tab. Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to before me by the said ESTEREE FRAZIER-PALMORE, a/k/a

ESTEREE PALMORE.

a/k/a ESTEREE PALMORE

Notary Public - State of Illinois My Commission Expires Nov 28, 2020

GERALDINE GREEN Official Seal

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EXHIBIT A

Lot Seventeen (17) and the North 8-1/3 feet of Lot Eighteen (18) in Whiteside and Totten's Subdivision of Block Three (3) of Warfield's Subdivision of the West half (1/2) of the Southeast quarter (1/4) of Section 34, Township 38 North, Range 14 East of the Third Principal Meridian, in Cook County, Illinois.

Assessor's Forcel No: 20-34-400-060-0000

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1632

CERTIFICATION OF LEATH RECERTE

CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

TATE FILE NUMBER 2010 0008173	WEDIOAE CENTIL		DATE ISSUED 02/05/2010			
DECEDENTS LEGAL NAME RUFUS PALMORE		SEX MALE	DATE OF DEATH FEBRUARY 01, 2010			
COUNTY OF DEATH	AGE AT LAST BIRTHDAY 66 YEARS	DATE OF BIRTH FEBRUARY	5, 1943			
CITY OR TOWN CHICAGO	THE THEORY STATES THE THE TANK	OR OTHER INSTITUTION NAME SSE BROWN MEDICAL CE	NTER			
PLACE OF DEATH INPATIENT						
BIRTHPLACE SOCIAL SECULO DODDSVILLE MS	RITY NUMBER MARITAL STATUS AT TIM MARRIED	E OF DEATH SURVIVING SPOUSI				
RESIDENCE 8340 S VERNON	APT. NO	CHICAGO	INSIDE CITY LIMITS? YES			
COUNTY STAT ZIP CO	\$ ### TAREST		ER'S NAME PRIOR TO FIRST MARRIAGE BERTHA CLARK			
INFORMANT'S NAME ESTREE PALMORE	RELATIONSHIP WIFE		CHICAGO IL 60619			
	CE OF DISPOSITION B'AH AM LINCOLN NATIONAL CEMETERY	LOCATION CITY OR TO ELWOOD, IL	VN AND STATE DATE OF DISPOSITION FEBRUARY 05, 2010			
FUNERAL HOME A A RAYNER AND SONS SOUTH, 318 EAST (19.5 STREET, CHICAGO, IL, 60619						
FUNERAL DIRECTOR'S NAME PAMEUA L HAGAN-OWENS			AL DIRECTOR'S ILLINOIS LICENSE NUMBER 008989			
LOCAL REGISTRAR'S NAME DAVID ORR		67 6565 Sebet Sebet Sebet 1	ILED WITH LOCAL REGISTRAR RUARY 3, 2010			
CAUSE OF DEATH PART RESPIRATO	RYFAILURE		É É DAYS			
(Final disease or condition resulting in death) b. METASTATIO	Die to (or as a co. sequ	ence of):	MONTHS MONTHS			
	Due to (or as a consequ	ence of)	A STANDARD OF THE STANDARD OF			
1 Property of the Contract of	Due to (or as a consequ		and I state a far antique and any age of the control of the contro			
PART II. Enter other significant conditions contribut	ing to deeth but not resulting in the underlying	ig cause given in PART.	WAS AN AUTOPSY PERFORMED? NO WERE AUTOPSY FINDINGS USED TO			
DID TOBACCO USE CONTRIBUTE TO DEATH?	FEMALE PREGNANCY STATUS		MANNER OF DEATH			
NO	NOT APPLICABLE	dente estretentente. est	ΝΔΓΙΙΡΑΙ			
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? DATE CAST SEEN FEBRUARY	ALIVE WAS MEDICAL EXAMINER	e er	CED TIME OF DEATH 02:00 PM			
CERTIFIER PHYSICIAN			DATE CERTIFIED FEBRUARY 02, 2010			
NAME, ADDRESS AND ZIP CODE OF PERSON COM	PLETING CAUSE OF DEATH		PHYSICIAN'S LICENSE NUMBER			



DR FAN ZHANG, 820'S DAMEN AVE CHICAGO, ILLINOIS 60612

This is to certify that this is a true and correct copy from the official death record filed with Illinois Department of Health.



