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86445972



Intercounty Title Company of Illinois

120 WEST MADISON STREET • CHICAGO • IL 60602 • (312) 977-2600



AFFIDAVIT RE DECEASED JOINT TENANT

STATE OF ILLINOIS
COUNTY OF COOK

} SS

RE: YOUR ORDER NO. _____

Calvin Scott, being duly sworn and for the purpose of inducing Intercounty Title Company of Illinois to issue the subject policy covering the hereinafter-described land, state:

- 1. That he resides at 5535 West Jackson, Chicago, Illinois;
- 2. That he was acquainted with Lizzie Scott, a/k/a Elizabeth Scott, who died on Sept. 9, 1975,

as evidenced by the attached certified copy of death certificate;

3. That said decedent was one of the owners of land described:

- In the subject order number;
- In the following legal description; Lot 34 and the South one half (1/2) of lot 35 in Block 7 in William A. Merigold's Resubdivision of the North 50 Acres of the East half of the North East quarter of Section 22, Township 39 North, Range 13, East of the Third Principal Meridian in Cook County, Illinois

*16-22-214-013
m'l
ALL
9.9. All*

4. That said decedent died:

- leaving no last will and testament;
- leaving a last will and testament, a copy of which is attached;

5. That the total value of the estate of said decedent for State of Illinois Inheritance tax and Federal estate tax purposes does not exceed \$ _____.

Subscribed and sworn to before

me by the said Calvin Scott affiant
this 30th day of September, 19 86.

Calvin Scott
(affiant's signature)

Mary Ann Kelly
Notary Public

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STATE OF ILLINOIS • SEEDS, II • OFFICE OF THE CLERK OF THE COURT

TWENTY TWO CENTS

CLERK OF THE COURT

COUNTY OF COOK

Property of Cook County Clerk's Office

285545972



MAIL TO :
MYRON H. SKOLLY
100 N. CASABEE ST SUITE 1407
CHICAGO, IL 60602

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STATE OF ILLINOIS 86145972 STATE PAS NUMBER 621941

September 12, 1975

BOARD OF HEALTH - CITY OF CHICAGO

MEDICAL CERTIFICATE OF DEATH

DECEASED—NAME Lizzie SEX Female DATE OF BIRTH 2 August 17, 1907 PLACE OF BIRTH Cook
 REGISTERED NUMBER 1610 UNDER 1 YEAR Yes UNDER 1 DAY Yes DATE OF DEATH September 9, 1975 COUNTY Cook

AGE—LAST BIRTHDAY (MONTH, DAY, YEAR) 68 MOBILE CITY Chicago MOBILE STATE Illinois MOBILE COUNTY Cook
 CITY, TOWN, VILL., OR SOLO DISTRICT NUMBER Chicago MOBILE OF OTHER INSTITUTION—NAME Loretto Hospital (IF NOT IN ENTRY, GIVE STREET AND NUMBER)

BIRTHPLACE (STATE OR FOREIGN COUNTRY) Arkansas CITIZEN OF WHAT COUNTRY U.S.A. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (GIVE YEAR) Married
 SOCIAL SECURITY NUMBER 12 430-53-8465 USUAL OCCUPATION Housewife KIND OF BUSINESS OR INDUSTRY Own Home NAME OF SURVIVING SPOUSE (GIVE NAME, IF IN FD) Jessie Scott
 RESIDENCE STATE Illinois COUNTY Cook CITY, TOWN, VILL., OR SOLO DISTRICT NO. Chicago U.S. WAR VETERAN NO WAR OR DATES OF SERVICE NO

FATHER—NAME Willie MOTHER—MAIDEN NAME Mary
 INFIRMANT'S SIGNATURE Willie RELATIONSHIP Daughter MAINTENANCE ADDRESS (GIVE STREET AND NO., CITY OR TOWN, STATE, ZIP) 645 So. Central Ave. Chicago, Illinois

DEATH WAS CAUSED BY, [ENTER ONE OR MORE CAUSES PER LINE FOR (a), (b), AND (c)]
 (a) Chronic Renal Failure APPROPRIATE INTERNAL MEDICAL RECORDS OBTAINED AND DEATH CERTIFICATE FILED 10 days
 (b) Congestive Heart Failure
 (c) Acute Myocardial Infarction

DATE OF OPERATION, IF ANY MAJOR FINDINGS OF OPERATION
 DATE 9-9-75 TIME 9-9-75 HOUR OF DEATH 9:15 P.M.

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THIS DEATH OCCURRED ON THE DATE, AT THE TIME AND PLACE, AND FROM THE CAUSE(S) STATED.
 SIGNATURE J. Benages, M.D. DATE SIGNED 9-10-75 ILLINOIS LICENSE NUMBER 36-36666

MAINTENANCE ADDRESS—CERTIFY STREET AND NUMBER OR R. F. D. CITY OR TOWN STATE ZIP
7700 West Madison Street River Forest Illinois 60305

BURIAL CREMATION, CEMETERY OR CREMATION NAME LOCATION CITY OR TOWN STATE DATE (MONTH, DAY, YEAR)
BURIAL Oak Ridge Hillside Illinois 9-15-75

FUNERAL HOME NAME STREET AND NUMBER OR R. F. D. CITY OR TOWN STATE
J.B. Lenoir Palmer Illinois

LOCAL REGISTRAR'S SIGNATURE Henry C. Brown DATE REC'D. BY LOCAL REGISTRAR (MONTH, DAY, YEAR)
SEP 12 1975

CHICAGO BOARD OF HEALTH Chicago Civic Center, Room 105, Chicago, Illinois 60607-265
 RAISED ON 1968 U. S. STANDARD CERTIFICATE

STATE OF ILLINOIS }
 COUNTY OF COOK }
 CITY OF CHICAGO } SS

I, Murrey C. Brown, M.D., Local Registrar of Vital Statistics of the City of Chicago, do hereby certify that I am the keeper of the records of births, stillbirths and deaths of the City of Chicago and that the laws of the State of Illinois and the ordinances of the City of Chicago, that the accompanying certificate on this sheet is a true copy as a record kept by me in pursuance of said laws and ordinances.

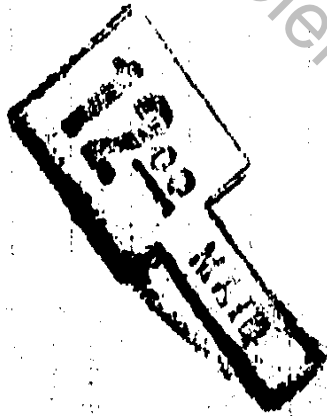
This Certified Copy VALID Only When Original BLUE SEAL AND BLUE SIGNATURE Are Affixed

Henry C. Brown


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DEPT-01 RECORDING \$12.25
T#1111 TRAN 0874 09/30/86 14:57:00
#2404 # C * -86-445972
COOK COUNTY RECORDER



-86-445972

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