

UNOFFICIAL COPY

THIS INSTRUMENT PREPARED BY:
SHELLY BERKOWITZ
7246 N. PULASKI RD.
CHICAGO, IL 60646



Chicago Title Insurance Company

DECEASED JOINT TENANCY AFFIDAVIT 87037797

STATE OF ILLINOIS
COUNTY OF

} ss.

Order No. _____

FLORENCE TODD being duly sworn
states that SHE resides at 9400 S. THROP in the City of
CHICAGO

That SHE was acquainted with WILLIE TODD

deceased who, at the time of his death, was one of the owners of the land in COOK
County, Illinois, described as:

*Lot 42 in William J. Wightman's Resubdivision
of Lots 1 to 18 inclusive in Block 40, Lots 12 to 28 inclusive in
Block 27. The N. 1/2 of Lot 30 - all of Lots 31 to 46 inclusive
in Block 33 in Isaac Cross's Subdivision of that part of the S. 1/2
of Section 37 Township 37 N., Range 14, East of the Third Principal
Meridian, 1/4 mi. W. of the Right of Way of the Chicago, Rock Island
& Pacific Railroad in Cook County, Illinois.*

P.I. # 25-05-329-016

87037797

That the deceased died Nov 5, 1986, as evidenced by a
certified copy of death certificate of the deceased attached hereto.

That the deceased died:

- Leaving no Last Will & Testament.
- 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 _____ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of _____ County, Illinois about _____

That the total value of the estate of the deceased, 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 TWENTY THOUSAND dollars.

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

Subscribed and sworn to before me by the said

FLORENCE TODD

this 19th day of January, A.D. 19 87

Shelly Berkowitz
Notary Public

Florence Todd
(affiant's signature)

FORM 3788



MAIL TO:
GODFREY STRUBIN
3739 W. GARLAND
CHICAGO, IL 60623

THIS INSTRUMENT PREPARED BY
SHELLEY BERKOWITZ
1018 N. PULASKI RD.
CHICAGO, IL 60642

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Property of Cook County Clerk's Office

DEPT-01 RECORDING \$12.25
1#2332 TRAN 4344 01/20/07 16:02:00
#8596 # 2-07-07 027797
COOK COUNTY RECORDER

87037797



Mail to,

GOLD CONSTRUCTION
3939 W. LAWRENCE AVE.
CHICAGO, IL. 60625

By Commission for the Division
NOTARY PUBLIC STATE OF ILLINOIS
SHELLEY BERKOWITZ
OFFICIAL NOTARY

12⁰⁰ MAIL

AT

EVERGREEN PARK, ILLINOIS

DEPUTY REGISTRAR

DATE

NOVEMBER 10, 1986

REGISTRAR

Janette Spivey

I HEREBY CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT COPY OF THE DEATH RECORD OF THE PERSON IN ITEM #1 AND THAT THIS RECORD WAS ESTABLISHED AND FILED IN MY OFFICE IN ACCORDANCE WITH THE PROVISIONS OF THE ILLINOIS STATUTES RELATING TO THE REGISTRATION OF BIRTHS, STILLBIRTHS, AND DEATHS.

16:33

REGISTRATION DISTRICT NO. 789
REGISTERED NUMBER 789

MEDICAL CERTIFICATE OF DEATH

STATE OF ILLINOIS

STATE PAL. 87037797

1. NAME (Last, first, middle or DECEASED OR DECEASED) Black, Willie	2. SEX MALE	3. DATE OF BIRTH (mo., day, year) Nov 5 - 1986	4. COUNTY OF BIRTH COOK
5. CITY, TOWN, VILL., OR BLDG. DISTRICT NUMBER Chicago EVERGREEN PARK	6. HOSPITAL OR OTHER INSTITUTION LITTLE CO. OF WIDERS	7. DATE OF DEATH (mo., day, year) NOV 13 1986	8. COUNTY OF DEATH COOK
9. STATE OF BIRTH (mo., day, year) Mississippi	10. CITIZEN OF WHAT COUNTRY USA	11. MARRIED, WIDOWED, DIVORCED (specify year) MARRIED	12. NAME OF SURVIVING SPOUSE (last name, first, middle, initial) Vingham
13. SOCIAL SECURITY NUMBER 427-445096	14. USUAL OCCUPATION Cement Finisher	15. BUSINESS OR OCCUPATION Construction	16. WAS DECEASED EVER IN U.S. (specify year on MOI) No
17. RESIDENCE STREET AND NUMBER 9405 Thoop St.	18. CITY, TOWN, VILL. OR BLDG. DISTRICT NO. Chicago	19. COUNTY COCK	20. STATE Illinois
21. FATHER - NAME Jerome	22. MOTHER - MARRIAGE NAME Alice Becker	23. DEATH WAS CAUSED BY: cardiomyopathy over myocardial infarction	24. IMMEDIATE CAUSE over to on as a consequence of myocardial infarction
25. PART II: OTHER SIGNIFICANT CONDITIONS, CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE CAUSE OF DEATH concomitant coronary artery disease	26. DATE OF OPERATION, IF ANY MAJOR FINDINGS OF OPERATION 1/08	27. AUTOPSY NO	28. IF AUTOPSY MADE, TRIMMER NUMBER (month, day, year) NO
29. (100) DID MOST ATTEND THE DECEASED AND LAST BORN NUMBER (100) ON 11/4/86	30. (MONTH, DAY, YEAR) 11/4/86	31. HOUR OF DEATH 4:53 P.M.	32. DATE SIGNED (mo., day, year) 11-6-86
33. SIGNATURE AND ADDRESS OF CERTIFIER 1222 W. 95th St. Chicago, Illinois	34. ILLINOIS LICENSE NUMBER 03-6045330	NOTE: IF AN INQUIRY WAS INVOLVED IN THIS DEATH, THE CONDITIONS ON MEDICAL EXAMINER MUST BE NOTIFIED.	
35. FUNERAL HOME House of Bereat 3125 W. Roosevelt Rd Chicago, Ill. 60612	36. FUNERAL DIRECTOR'S SIGNATURE Dorothy J. Bunch	37. FUNERAL DIRECTOR'S BUSINESS LICENSE NUMBER 5752	38. DATE REC'D. BY LOCAL REGISTRAR (month, day, year) NOVEMBER 10, 1986

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