

UNOFFICIAL COPY

88298118



# Chicago Title Insurance Company

## DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS  
COUNTY OF COOK

} ss.

Order No. \_\_\_\_\_

OLIVIA WILLIAMS

being duly sworn

states that she resides at 5917 South Carpenter in the City of Chicago, Illinois.

That she was acquainted with ALLEN WILLIAMS

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

Lot forty-five (45) in James U. Borden's Subdivision of Block 2 in Thompson & Holmes Subdivision of the East 45 acres of the North 60 acres of the South East quarter of Section 17, Township 38 North, Range 14, East of the Third Principal Meridian.

P.T.N.

Commonly known as: 5917 South Carpenter, Chicago, Illinois.

TAX # 20-17-403-010-0000

That the deceased died December 20, 1987, 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 SIX HUNDRED THOUSAND (\$600,000.00) 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

OLIVIA WILLIAMS

this 7th day of June, A.D. 19 88

*Robert P. Corbitt*

Notary Public

*x Olivia Williams*  
(affiant's signature)

PREPARED BY AND MAIL TO: Howard M. Hoff  
GOLDSTINE AND BROIDA, LTD.  
7660 West 62nd Place  
Summit, Illinois 60501

FORM 3703



88298118

# UNOFFICIAL COPY

PL 1000000000

Property of Cook County Clerk's Office

1000000000

PL 1000000000



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REGISTRATION DISTRICT NO 16-10  
MEDICAL CERTIFICATE OF DEATH  
STATE OF ILLINOIS  
625040

REGISTERED NUMBER 16-10  
DECEASED NAME Allen  
FIRST LAST  
WILLIAMS  
SEX Male  
DATE OF BIRTH 2, 1901  
DATE OF DEATH December 20, 1987

CITY OF BIRTH Chicago  
CITIZENSHIP American  
HOSPITAL OR OTHER INSTITUTION St Bernards Hospital  
CITY, STATE AND ZIP CODE Chicago, Illinois, 60621

STATE OF BIRTH MISSISSIPPI  
CITIZENSHIP OF WHAT COUNTRY United States  
MARRIAGE STATUS Married  
MOTHER MARY ANN MCCOWAN  
FATHER JOSEPH WILLIAMS

RESIDENCE STREET AND NUMBER 5917 S. Carpenter St  
CITY, STATE AND ZIP CODE Chicago, Illinois, 60621  
MARRIAGE ADDRESS 64th & Dan Ryan Expressway Chicago

DEATH WAS CAUSED BY  
IMMEDIATE CAUSE  
1a) *Cardiovascular disease*  
1b) *Myocardial infarction*  
1c) *due to atherosclerosis*

OTHER SIGNIFICANT CONDITIONS  
1a) *Diabetes mellitus*  
1b) *hypertension*  
1c) *obesity*

DATE OF OPERATION  
MAJOR FINDINGS OF OPERATION  
HOUR OF DEATH 10:35P M.

NAME AND ADDRESS OF CERTIFIER  
Dr. H. Taber 1007 West 63rd Street Chicago, Illinois 60621  
ILLINOIS LICENSE NUMBER 36-64912

EDUCATION  
2a) *High School*  
2b) *Lincoln*  
2c) *North*  
2d) *Illinois*  
2e) *Dec. 28, 1987*

22a) *Dr. H. Taber*  
22b) *10-21-87*  
22c) *36-64912*

23a) *Dr. H. Taber*  
23b) *10-21-87*  
23c) *36-64912*

24a) *Dr. H. Taber*  
24b) *10-21-87*  
24c) *36-64912*

25a) *Dr. H. Taber*  
25b) *10-21-87*  
25c) *36-64912*

26a) *Dr. H. Taber*  
26b) *10-21-87*  
26c) *36-64912*

27a) *Dr. H. Taber*  
27b) *10-21-87*  
27c) *36-64912*

28a) *Dr. H. Taber*  
28b) *10-21-87*  
28c) *36-64912*

29a) *Dr. H. Taber*  
29b) *10-21-87*  
29c) *36-64912*

30a) *Dr. H. Taber*  
30b) *10-21-87*  
30c) *36-64912*

88298118  
December 23, 1987  
STATE OF ILLINOIS  
COUNTY OF COOK  
CITY OF CHICAGO  
SS

1. LONNIE C. EDWARDS M.D. M.P.A., 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 BY VIRTUE OF 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 WHEN MULTICOLOR SEAL AND BLUE SIGNATURE ARE AFFIXED

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Property of Cook County Clerk's Office

DEPT-01 RECORDING \$13.25  
T#1111 TRAN 8857 07/07/88 12:18:00  
#1528 # A \* -88-298118  
COOK COUNTY RECORDER

88298118

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