



UNOFFICIAL COPY

Intercounty Title Company of Illinois

SUITE 400 • 120 WEST MADISON • CHICAGO • ILLINOIS 60602
(312) 346-3774



90442525

AFFIDAVIT RE DECEASED JOINT TENANT

STATE OF ILLINOIS
COUNTY OF Cook

} SS

RE: YOUR ORDER NO. 1400287666

Kathleen D. Sullivan, being duly sworn and for the purpose of including Intercounty Title Company of Illinois to issue the subject policy covering the hereinafter-described land, state:

1. That she resides at 2814 Perry Road Flossmoor Illinois 60422;
2. That she was acquainted with Ralph B. Sullivan Jr., who died on 2-23-81,

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 twenty three in Flossmoor Delis Subdivision of the South 1371.55 feet of the East half of the Southwest quarter of the South 1371.55 feet of the West half of the Southeast quarter lying East of the Easterly right of way line of the Illinois Central Railroad (except the East 684.9 feet of said West half of the Southeast quarter and except that part of said East half of the Southwest quarter conveyed to Public Service Company of Illinois, document 8927301) all in Section twelve Township thirty five North, Range 13, East of the Third Principal Meridian.

DEPT-01 RECORDING \$13.00
T#4444 TRAN 1355 09/11/90 13:34:00
#9691 ÷ D * -90-442525
COOK COUNTY RECORDER

4. That said decedent died:

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

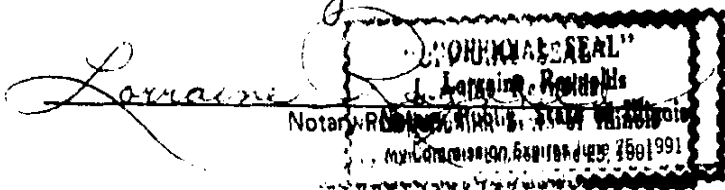
5. That the total value of the estate of said decedent for State of Illinois inheritance tax and Federal estate tax purposes does not exceed \$ _____.

Subscribed and sworn to before

90442525

me by the said affiant
this 24th day of August, 1990.

Kathleen D. Sullivan
(affiant's signature)



13
Box 91

90442525

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

1. NAME OF DECEASED: **Ralph R Sullivan, Jr.** SEX: **Male** DATE OF BIRTH: **3 February 21, 1981**

2. SEX: **Male** RACE: **White** HEIGHT: **5' 5 1/2"** WEIGHT: **150** HAIR: **Dark** EYES: **Blue**

3. OCCUPATION: **None** PLACE OF BIRTH: **Chicago, Ill.** PLACE OF DEATH: **Chicago, Ill.**

4. MARITAL STATUS: **Married** NAME OF SPOUSE: **Kathleen Dumser**

5. ADDRESS: **145 Flossmoor Sullivan, Sr. to Emily**

6. CAUSE OF DEATH: **Metastatic lung carcinoma**

7. DATE OF DEATH: **Feb. 23, 1981** TIME OF DEATH: **9:00 P.M.**

8. PLACE OF BURIAL: **Holy Sepulchre** CITY: **Worth, Illinois**

9. SIGNATURE OF REGISTRAR: **Walter J. Johnson**

10. SIGNATURE OF LOCAL REGISTRAR: **Bruce N. Tews**

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named therein and that this record was established and filed in my office in accordance with the provisions of the Illinois Statutes relative to the registration of births, stillbirths and deaths.

DATED: _____ SIGNED: Walter J. Johnson LOCAL REGISTRAR AT CHICAGO, ILLINOIS.

The original of this death record is permanently filed with the Illinois Dept. of Public Health at Springfield. County Clerks and Local Registrars are authorized to make certifications from copies of the original record. The Illinois Statutes provide that the certification of a death record by the Dept. of Public Health, Local Registrar or the County Clerk shall be prima facie evidence in all courts and places of the facts therein stated.