

UNOFFICIAL COPY

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Chicago Title Insurance Company

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF _____

} ss.

Order No. _____

ONEAL FLEMING being duly sworn

states that I resides at 10140 S Oglesby in the City of Chicago, Ill.

That I was acquainted with MARtha D. FLEMING deceased who, at the time of HER death, was one of the owners of the land in Cook County, Illinois, described as:

Lot 16 of 1/4 lot #7 BK 29
Calumet Trust Sub of Parcel See 1207
See 12-3714

00069230

-- That the deceased died 12-22-88, 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 _____ 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

_____ this _____ day of _____, A.D. 19 _____

Notary Public

ONEAL FLEMING
(affiant's signature)

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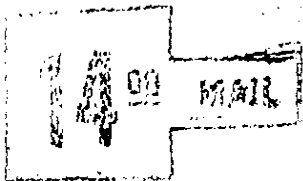
90059230

Property of Cook County Clerk's Office

Dneal Fleming
10140 S Oglesby
Chgo Ill 60617

90059230

DEPT-01 RECORDING
T2222 TRN 4157 02/09/90 16:24:00 \$14.25
95316 SE-069230
COOK COUNTY RECORDER

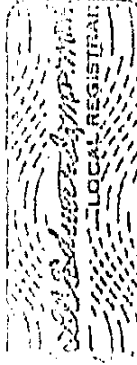


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January 13, 1989.

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

I, **CONNIE 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

00069230

STATE FILE NUMBER

625629

MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. **16.10**
SEX **Female**
DATE OF DEATH **December 22, 1988**

LAST NAME **O'Neal** FIRST NAME **Fleming** SEX **Female** DATE OF BIRTH **1911** DATE OF DEATH **December 22, 1988**
CITY OF BIRTH **CHICAGO** COUNTY OF BIRTH **COOK** COUNTY OF DEATH **COOK**
RACE **Black** MARRIAGE STATUS **Married** DATE OF MARRIAGE **SEPTEMBER 16, 1929**
HOSPITAL OR OTHER INSTITUTION **South Shore Hospital** NAME OF SURVIVING SPOUSE **O'Neal Fleming**
CITY, TOWN, OR ROAD DISTRICT NUMBER **Chicago** ADDRESS **8015 S. Luella Chgo. Ill. 60617**

CITIZENSHIP **U.S.A.** KIND OF BUSINESS OR INDUSTRY **Laborer** GTE Electric
CITY, TOWN, OR ROAD DISTRICT NO. **Chicago** MOTHER-MAIDEN NAME **Stewart**
CITY, TOWN, OR ROAD DISTRICT NO. **Chicago** MOTHER-MAIDEN NAME **Ada**

RELATIONSHIP **Med. Rec** MARRIAGE ADDRESS **8015 S. Luella Chgo. Ill. 60617**
DEATH WAS CAUSED BY **Cardio Pulmonary Arrest** (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))
IMMEDIATE CAUSE **Cardio Pulmonary Arrest** (a) Minutes
Massive Pulmonary Embolism (b) Minutes
Osteoarthritis Both knees (c) Years

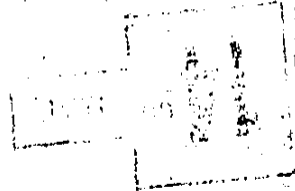
OTHER SIGNIFICANT CONDITIONS: **CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I**
MAJOR FINDINGS OF OPERATION **Cardio Pulmonary Arrest**
I did attend **December 22, 1988** HOUR OF DEATH **6:27 a.m.**

DATE OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.
DATE SIGNED **December 22, 1988**
ILLINOIS LICENSE NUMBER **36-53858**

NAME **Jia Hwang, M.D.** ADDRESS **8015 S. Luella Chgo, IL. 60617**
CITY OF TOWN **CHICAGO** STATE **ILLINOIS** DATE **December 28, 1988**
CITY OF TOWN **HOMEWOOD** STATE **ILLINOIS** DATE **December 28, 1988**
CITY OF TOWN **CHICAGO** STATE **ILLINOIS** DATE **December 28, 1988**
CITY OF TOWN **CHICAGO** STATE **ILLINOIS** DATE **December 28, 1988**
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ILLINOIS Department of Public Health - Office of Vital Records (BASED ON 1978 U.S. STANDARD CERTIFICATE)
NOV 14 1989
DEC 24 1988

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Property of Cook County Clerk's Office