

UNOFFICIAL COPY

91605448



Chicago Title Insurance Company

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF

ss.

Order No. _____

I, Samuel Emmit being duly sworn
states that I resides at 5527 S CARPENTER ST CHICAGO in the City of
Chicago

That I was acquainted with ETHA EMMIT
deceased who, at the time of HER death, was one of the owners of the land in COOK
County, Illinois, described as:

Lot 49 in A. M. Pence's Subdivision of the Northeast quarter of the North
West quarter of the North East quarter of Section 17, Township 38 North,
Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

20-17-203-012-0000

That the deceased died OCTOBER 29, 1991, 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 _____

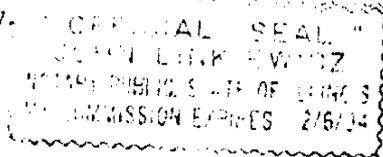
That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of _____ dollars.

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

[Signature]
this 18 day of September, A.D. 19 91

Notary Public

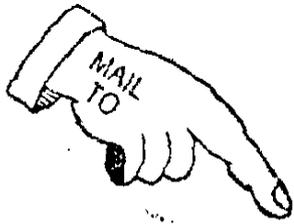


[Signature]
(affiant's signature)

UNOFFICIAL COPY

Property of Cook County Clerk's Office

14 30



SAMUEL EMMETT
5527 S. Carpenter St 60621
Chicago, Ill

916051448

DEPT-01 RECORDING
TRAN 2880 11/18/91 14:36:00
145555
4847 * -91-605448
COOK COUNTY RECORDER

916051448

8:490916

OCT 31 1991

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

I, VIRGINIA L. PARKER, M.B.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 FOR 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 OF A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES.

THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

6203A7

DECEASED: **Ella** (FIRST) **EMMETT** (LAST) **Female** (SEX) **October 29, 1991** (DATE OF DEATH)

AGE: **77** (AT TIME OF DEATH) **March 19, 1914** (DATE OF BIRTH)

HOSPITAL: **St. Bernard Hospital** (NAME OF HOSPITAL) **Inpatient** (STATUS)

PHYSICIAN: **Samuel (Emmett) Hamlett** (NAME) **MD** (DEGREE)

OCCUPATION: **Home-Maker** (OCCUPATION) **Chicago** (CITY) **Illinois** (STATE)

RELIGION: **Black** (RELIGION) **16** (RELIGIOUS PRACTICE)

ETHNICITY: **Rice** (ETHNICITY)

RELATIONSHIP: **17b Daughter** (RELATIONSHIP) **11435 S Harvard, Chgo, Ill** (MAILING ADDRESS)

CAUSE OF DEATH: **(a) Cerebral Infarction**
(b) Severe Cerebral Arteriosclerosis
(c) Peripheral Vascular Insufficiency

DIAGNOSIS: **Diabetic Mellitus** (DISEASE OR CONDITION)

DATE OF DEATH: **OCT 29 1991** (DATE) **2:52** (TIME) **10-30-91** (MONTH DAY YEAR)

PLACE OF DEATH: **64th & Dan Ryan Expressway** (PLACE OF DEATH)

DEATH CERTIFICATE NUMBER: **36-5328** (NUMBER)

REGISTRATION NUMBER: **243** (NUMBER)

CITY/TOWN: **Oakland** (CITY/TOWN) **Illinois** (STATE)

STREET AND NUMBER: **10133 S. Halsted Chicago, Illinois 60628** (STREET AND NUMBER)

SIGNATURE: **Virginia L. Parker** (SIGNATURE) **MD** (DEGREE)

DATE OF SIGNATURE: **OCT 31 1991** (DATE)

UNOFFICIAL COPY

Property of Cook County Clerk's Office

91605448