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708-756-4000
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Illinois.

X Leaving a Last Will & Testament.

That the total value of the estate of the deceased, including both real and personal property owned by the deceased individually at the time of the death of the deceased does not exceed the sum of \$50,000.00

Affiant makes this affidavit for that purpose of inducing a title company to issue a Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to
before me this 31st day
of November, 1991.

Judith A. Gordon
Notary Public



92871246
Cook County Clerk's Office

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OFFICIAL SEAL
Judith A. Gordon
Notary Public, State of Illinois
My Commission Expires 02-28-11

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LEGAL DESCRIPTION

PARCEL 1: Lot 226 in Glenwood Manor Unit No. 2, a Subdivision of part of the Northwest 1/4 of Section 4, Township 35 North, Range 14 East of the Third Principal Meridian, in Cook County, Illinois.

P.I.N.: 32-04-107-018-0000

Commonly known as: 310 Pleasant Drive,
Glenwood, Il. 60425

PARCEL 2: Unit 6-B1 and Unit No. 10 together with its undivided percentage interest in the common elements in Ridgeview Condominium as delineated and defined in the Declaration recorded as Document No. 26882469, in the Southeast 1/4 of Section 32, Township 36 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

P.I.N.: 29-32-406-044-1066 & 29-32-406-044-1094

Commonly known as: 926 Olive Street #3B,
Homewood, Il. 60430

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01071856

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STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

STATE FILE NUMBER
616575

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO 16.10
REGISTERED NUMBER 11

DECEASED NAME
Edmund Leoly Peterson

DATE OF BIRTH 3 September 1, 1901
DATE OF DEATH 30 February 10, 1924
SEX Male
AGE LAST BIRTHDAY 23
HOSPITAL OR INSTITUTION NAME St. Luke's Medical Center
CITY TOWN VILLAGE OR ROAD DISTRICT NAME Chicago

MARRIED OR UNMARRIED UNMARRIED
MARRIED BY (NAME OF CLERK) [Signature]
MARRIED BY (NAME OF CLERK) [Signature]
MARRIED BY (NAME OF CLERK) [Signature]

FATHER'S NAME William Peterson
MOTHER'S NAME Lucille Van Murkle
MARRIAGE DATE 16 [illegible]

DECEASED'S NAME (Full Name) Mrs. Louise Peterson
RESIDENT ADDRESS (Street and Number) 17c 310 Pleasant Drive, Glenwood, Illinois 60425
CITY TOWN VILLAGE OR ROAD DISTRICT NAME Glenwood, Illinois

CAUSE OF DEATH (a) Hepatic Insufficiency
(b) Cirrhosis of the Liver
(c) [illegible]
CONDITIONS IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE OF STATING THE UNDERLYING CAUSE LAST

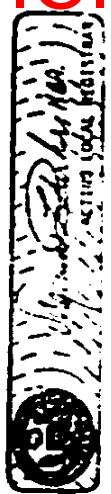
DATE OF OPERATION 20
SIGNATURE M. Ramsey
NAME AND ADDRESS OF PHYSICIAN M. Ramsey, 1653 W. Congress Parkway, Chicago, Ill. 60612

DATE OF EXAMINATION 20
SIGNATURE [Signature]
NAME AND ADDRESS OF PHYSICIAN [illegible]

DATE OF EXAMINATION 20
SIGNATURE [Signature]
NAME AND ADDRESS OF PHYSICIAN [illegible]

DATE OF EXAMINATION 20
SIGNATURE [Signature]
NAME AND ADDRESS OF PHYSICIAN [illegible]

I, VIRGINIA L. PARKER, M.P.A. ACTING 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.

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