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**REI REAL ESTATE INDEX**

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Lakeside Bank  
1338 Milwaukee Ave.  
Libertyville, IL  
60048

92551669



1820 RIDGE AVENUE  
EVANSTON, IL 60201-3411  
708 864 9000 FAX 708 481 6977



**DECEASED JOINT TENANCY AFFIDAVIT**

STATE OF ILLINOIS  
COUNTY OF \_\_\_\_\_

ss.

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

I ESSIE MAE MILLER being duly sworn  
states that I resides at 4156 S. BERKLEY CHICAGO, IL In the City of  
CHICAGO

That I was acquainted with AMZE MILLER  
deceased who, at the time of his death, was one of the owners of the land in COOK  
County, Illinois, described as:

Legal Description: The Northerly 16 feet of the Southerly 28 feet of Lot 81 in Ferry Farwell and Turner and Bond's  
Resubdivision of Block 3 (except Lots 21 and 22) in the Bayard and Palmer's Addition in the NW fractional 1/4 of Section  
2, Township 38 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

D/W 20-02-0116-029

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R-7-1278  
RE TITLE SERVICES #

That the deceased died July 15 1972, 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

ESSIE MAE MILLER

this 2<sup>nd</sup> day of JUNE, A.D. 19 92

Budimir Radovic

Notary Public  
OFFICIAL SEAL  
BUDIMIR RADOVIC  
NOTARY PUBLIC STATE OF ILLINOIS  
MY COMMISSION EXP. DEC. 16, 1992

Essie Mae Miller  
(Affiant's Signature)

DEPT-01 RECORDING \$23.50  
T#8888 TRAN 1367 07/28/92 09:31:00  
#4314 ÷ E \* -92-551669  
COOK COUNTY RECORDER

UNOFFICIAL COPY



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Property of Cook County Clerk's Office

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STATE OF ILLINOIS  
MEDICAL CERTIFICATE OF DEATH  
619607

REGISTRATION NO. 6110  
DISTRICT NO. 1  
REGISTERED NUMBER 110830  
DECEASED-NAME ARYZE  
AGE - LAST BIRTHDAY (M, D, Y) 54  
SEX MALE  
DATE OF BIRTH (MONTH, DAY, YEAR) 6 MARCH 3, 1918  
DATE OF DEATH (MONTH, DAY, YEAR) JULY 15, 1972  
PLACE OF DEATH COOK COUNTY  
HOSPITAL OR OTHER INSTITUTION-NAME DOA OSTEOPATHIC HOSPITAL

RESIDENCE CHICAGO  
CITIZEN OF WHAT COUNTRY USA  
MARRIED (MARRIED, SEPARATED, DIVORCED, WIDOWED)  
NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF DIFFERENT) ESSIE MAE PATTON  
SOCIAL SECURITY NUMBER 325 16 0415  
BUTCHER  
AGAP. PACKING CO.  
U.S. WAR VETERAN (WAR OR DATES OF SERVICE) HOME  
RESIDENCE ILLINOIS COOK  
CITY, TOWN, VILLAGE, OR ROAD DISTRICT NO. CHICAGO  
STREET AND NUMBER 1156 S. BERKLEY  
CITY, STATE, ZIP CODE CHICAGO ILLINOIS 60605

FATHER-NAME PUNKNEY  
MOTHER-MAIDEN NAME MILLER  
MOTHER-NAME MILLER  
DEATH CAUSED BY  
DEATH CAUSED BY (SEE PART I FOR (a), (b), AND (c))  
ACUTE MECHANICAL ASPHYXIA  
RELATIONSHIP WIFE  
MAILING ADDRESS 1156 SOUTH BERKLEY AVENUE  
APPROXIMATE DATE OF DEATH BETWEEN QUARTER AND YEAR 7/15/72

NEEDS SIGNATURE  
SIGNATURE  
ACUTE MECHANICAL ASPHYXIA  
DEATH CAUSED BY (SEE PART I FOR (a), (b), AND (c))  
ACUTE MECHANICAL ASPHYXIA  
RELATIONSHIP WIFE  
MAILING ADDRESS 1156 SOUTH BERKLEY AVENUE  
APPROXIMATE DATE OF DEATH BETWEEN QUARTER AND YEAR 7/15/72

CONDITIONS, IF ANY, WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STRENGTH THE OTHER. (b) LIVING CAUSE LAST.  
PART II. OTHER SIGNIFICANT CONDITIONS, CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE (SEE PART I FOR (a), (b), AND (c))  
HYPERTENSIVE HEART DISEASE

DATE OF OPERATION, IF ANY MAJOR FINDINGS OF OPERATION  
DATE OF OPERATION (MONTH, DAY, YEAR) 6/16/72  
HOUR OF DEATH 7:30 P.M.  
I ATTENDED THE DECEASED FROM 6/16/72 TO 6/16/72  
NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH, THE CORONER MUST BE NOTIFIED.

1 CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THIS DEATH OCCURRED ON THE DATE, AT THE TIME AND PLACE, AND FROM THE CAUSE(S) STATED  
SIGNATURE  
DATE SIGNED 7/17/72  
ILLINOIS LICENSE NUMBER 36-36303

20a ADDRESS-CERTIFIER  
STREET AND NUMBER OR BOX NUMBER AND CITY OR TOWN AND STATE AND ZIP CODE  
10832 S. WILMINGTON ST. CHICAGO, ILLINOIS 60628  
20b MAILING ADDRESS-CERTIFIER  
STREET AND NUMBER OR BOX NUMBER AND CITY OR TOWN AND STATE AND ZIP CODE  
5144 S. WILMINGTON ST. CHICAGO, ILLINOIS 60628  
21a BUPAL CREMATION, REMOVAL, OR BURIAL  
CITY OR TOWN AND STATE AND ZIP CODE  
CHICAGO, ILLINOIS 60653  
21b FUNERAL HOME  
NAME AND ADDRESS  
METROPOLITAN FUNERAL HOME, 1445 SO. N. L. KING DRIVE, CHICAGO, ILLINOIS 60653  
21c FUNERAL DIRECTOR'S SIGNATURE  
NAME AND ADDRESS  
Murray C. Brown, 1445 So. N. L. King Drive, Chicago, Illinois 60653

22a MEDICAL REGISTRAR'S SIGNATURE  
Murray C. Brown  
22b DATE RECD. BY LOCAL REGISTRAR (MONTH, DAY, YEAR)  
JULY 15, 1972  
22c ILLINOIS LICENSE NUMBER 3786  
22d DATE RECD. BY LOCAL REGISTRAR (MONTH, DAY, YEAR)  
JULY 15, 1972  
22e ILLINOIS LICENSE NUMBER 60653  
22f DATE RECD. BY LOCAL REGISTRAR (MONTH, DAY, YEAR)  
JULY 15, 1972  
22g ILLINOIS LICENSE NUMBER 3786  
22h DATE RECD. BY LOCAL REGISTRAR (MONTH, DAY, YEAR)  
JULY 15, 1972  
22i ILLINOIS LICENSE NUMBER 60653  
22j DATE RECD. BY LOCAL REGISTRAR (MONTH, DAY, YEAR)  
JULY 15, 1972  
22k ILLINOIS LICENSE NUMBER 3786  
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22w ILLINOIS LICENSE NUMBER 3786  
22x DATE RECD. BY LOCAL REGISTRAR (MONTH, DAY, YEAR)  
JULY 15, 1972  
22y ILLINOIS LICENSE NUMBER 60653  
22z DATE RECD. BY LOCAL REGISTRAR (MONTH, DAY, YEAR)  
JULY 15, 1972

92551669

JULY 18, 1972  
STATE OF ILLINOIS  
COUNTY OF COOK  
CITY OF CHICAGO } SS

I, Murray C. Brown, M.D., 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  
Only When Original BLUE  
SEAL AND BLUE SIGNATURE  
Are Affixed.

Murray C. Brown  
ILLINOIS REGISTRAR



BOARD OF HEALTH - CITY OF CHICAGO

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