

UNOFFICIAL COPY

92825337



# Chicago Title Insurance Company

## DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS  
COUNTY OF Cook

} ss.

Order No. n/a

Kathryn M. Wilson, now known as Kathryn M. Sterbis being duly sworn

states that she resides at 18743 S. Center Street in the City of Homewood, Illinois 60430

That she was acquainted with Anna G. McCarthy deceased who, at the time of her death, was one of the owners of the land in Cook County, Illinois, described as:

South 1/2 of Lot 4 in Frank Debagach's 103rd Street Acres, being a subdivision of the East 1/2 of the North West 1/4 of the North East 1/4 of Section 14, Township 37 North, Range 12 East of the Third Principal Meridian, in Cook County, Illinois

PTN: 23-14-218-012-0000

DEPT-01 RECORDING 475.50  
T45555 IBM 3378 12/09/92 11:23:00  
40727 \$ 42-925.557  
COOK COUNTY RECORDER

That the deceased died July 11, 1992, 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 (Zero) -0- dollars.

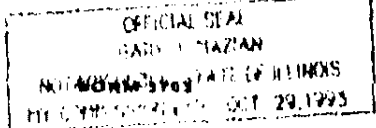
Affiant makes this affidavit for that purpose of inducing the Chicago Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to before me by the said

Kathryn M. Sterbis  
this 7th day of December, A.D. 19 92

[Signature]  
Notary Public

X Kathryn M. Sterbis  
(affiant's signature)



92825337

2392

UNOFFICIAL COPY

Property of Cook County

99020337



GARY J. MAZIAN  
60 ORLAND SQUARE DRIVE  
ORLAND PARK, IL.  
60462

# UNOFFICIAL COPY

AT

EVERGREEN PARK, ILLINOIS

DEPUTY REGISTRAR

DATE

AUGUST 3, 1992

REGISTRAR

*Annette Thomas*

I HEREBY CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT COPY OF THE DEATH RECORD OF THE PERSON IN ITEM #1 AND THAT THIS RECORD WAS ESTABLISHED AND FILED IN MY OFFICE IN ACCORDANCE WITH THE PROVISIONS OF THE ILLINOIS STATUTES RELATING TO THE REGISTRATION OF BIRTHS, STILLBIRTHS AND DEATHS.

## STATE OF ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER

524203

REGISTRATION DISTRICT NO. 16:33		REGISTERED NUMBER 571		DECEASED NAME ANNA		FIRST ANNA		LAST MCCARTHY		SEX FEMALE		DATE OF DEATH MONTH DAY YEAR 31 JULY 1992	
COUNTY OF DEATH COOK		AGE LAST BIRTHDAY (MNS) 58 95		CITY TOWN TWP. OR ROAD DISTRICT NUMBER 112 HOMEMAKER		HOSPITAL OR OTHER INSTITUTION NAME (IF NOT IN EITHER GIVE STREET & CITY NUMBER) 6 LITTLE COMPANY OF MARY HOSPITAL		DATE OF BIRTH MONTH DAY YEAR 31 AUGUST 1896		EDUCATIONAL SPECIFICATION (HIGHEST GRADE COMPLETED) 8		COUNTY COOK	
EVERGREEN PARK		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED, (SPECIFY)		CITY TOWN TWP. OR ROAD DISTRICT NO. PALOS HILLS		NAME OF SURVIVING SPOUSE (GIVE FULL NAME & MARRIAGE DATE)		KIND OF BUSINESS OR INDUSTRY NONE		EDUCATIONAL SPECIFICATION (HIGHEST GRADE COMPLETED) 8		COUNTY COOK	
10334-18-2523		SOCIAL SECURITY NUMBER		CITY TOWN TWP. OR ROAD DISTRICT NO. PALOS HILLS		NAME OF SURVIVING SPOUSE (GIVE FULL NAME & MARRIAGE DATE)		KIND OF BUSINESS OR INDUSTRY OWN HOME		EDUCATIONAL SPECIFICATION (HIGHEST GRADE COMPLETED) 8		COUNTY COOK	
132 ILLINOIS		ZIP CODE 604165		CITY TOWN TWP. OR ROAD DISTRICT NO. PALOS HILLS		NAME OF SURVIVING SPOUSE (GIVE FULL NAME & MARRIAGE DATE)		KIND OF BUSINESS OR INDUSTRY OWN HOME		EDUCATIONAL SPECIFICATION (HIGHEST GRADE COMPLETED) 8		COUNTY COOK	
FATHER NAME PAUL		MOTHER NAME GAERTIG		CITY TOWN TWP. OR ROAD DISTRICT NO. PALOS HILLS		NAME OF SURVIVING SPOUSE (GIVE FULL NAME & MARRIAGE DATE)		KIND OF BUSINESS OR INDUSTRY OWN HOME		EDUCATIONAL SPECIFICATION (HIGHEST GRADE COMPLETED) 8		COUNTY COOK	
17 JEANNINE MANNERINO/CLERK		18 PART I		19		20		21		22		23	
CONDITIONS, IF ANY WHICH GAVE RISE TO STATE DATE CAUSE (A) STATING THE UNDERLYING CAUSE LAST		(a) Pulmonary Edema		(b) Incomplete HEARIN		(c)		AUTOPSY (YES) NO		DATE SIGNED 8-1-92		ILLINOIS LICENSE NUMBER 220 08 - 057437	
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REG-20 (Rev. 5-80) Illinois Department of Public Health - Division of Vital Records