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# Chicago Title Insurance Company

## DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS  
COUNTY OF

} ss.

Order No. 1259129

HAIG W. DEPOIAN being duly sworn  
states that HE resides at 5246 W. PATTERSON In the City of  
CHICAGO, IL 60641

That HE was acquainted with MARY A. DEPOIAN  
deceased who, at the time of HER death, was one of the owners of the land in COOK  
County, Illinois, described as:

LOT 32 IN BLOCK 2 IN MARQUETTE LAWN, BEING A RESUBDIVISION OF  
BLOCKS 1 AND 2 IN ELECTRIC SUBDIVISION, BEING A SUBDIVISION OF  
BLOCK 1 AND THE EAST HALF OF BLOCK 2 OF MAHAN'S SUBDIVISION OF THE  
SOUTH HALF OF THE NORTHWEST QUARTER OF SECTION 13, TOWNSHIP 38  
NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK  
COUNTY, ILLINOIS.

P.I.N. 19-13-122-009

DEPT-01 RECORDING 928.50  
T05555 TRAN 7621 01/21/92 14:30:00  
9279 E \* 92-038723  
COOK COUNTY RECORDER

4455

That the deceased died SEPTEMBER 25, 1991, as evidenced by a  
certified copy of death certificate of the deceased attached hereto.

That the deceased died:

92038723

- 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 SIXTY-SIX THOUSAND FIVE HUNDRED \*66,100 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.

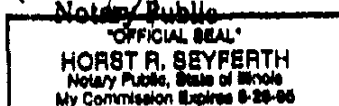
Subscribed and sworn to before me by the said

HAIG W. DEPOIAN

this 17<sup>th</sup> day of JANUARY, A.D. 19 92

Horst R. Seyferth  
Notary Public

Haig W. Depoian  
(affiant's signature)



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Property of Cook County Clerk's Office



Return to: Harold Seyferth  
4001 N Elston  
Chicago, IL 60641

054

REGISTRATION DISTRICT NO. **1610**  
 REGISTERED NUMBER

STATE OF ILLINOIS  
**MEDICAL CERTIFICATE OF DEATH**

STATE REGISTRATION NUMBER **618143**

**SEP 27 1991**  
 STATE OF ILLINOIS  
 COUNTY OF COOK  
 CITY OF CHICAGO

DECEASED NAME: **MARY** FIRST: **DEPOIAN** LAST: **DEPOIAN** SEX: **Female** DATE OF BIRTH: **3 September 25, 1991**  
 COUNTY OF DEATH: **Cook** AGE LAST BIRTHDAY (MOS): **76** HOSPITAL OR OTHER INSTITUTION NAME OR NOT IN EITHER ONE: STREET AND NUMBER: **54 FEBRUARY 2, 1915**  
 CITY TOWN TWP OR ROAD DISTRICT NUMBER: **Chicago** HOSPITAL OR OTHER INSTITUTION NAME OR NOT IN EITHER ONE: STREET AND NUMBER: **Indalient**

6a. **Chicago** 6b. **Bohemian Home for the Aged** 6c. **Indalient**  
 7. **Chicago** 8. **Widowed** 9. **No**  
 10. **321-18-0136A** 11a. **Midwife** 11b. **Medical** 12. **12**  
 RESIDENCE STREET AND NUMBER: **5061 No. Pulaski Rd.** CITY TOWN TWP OR ROAD DISTRICT NO.: **Chicago** INSIDE CITY: **Yes** COUNTY: **COOK**

13a. **Illinois** 13b. **60630** 13c. **White** 14a. **None** 14b. **None** 14c. **None** 14d. **None** 14e. **None** 14f. **None** 14g. **None** 14h. **None** 14i. **None** 14j. **None** 14k. **None** 14l. **None** 14m. **None** 14n. **None** 14o. **None** 14p. **None** 14q. **None** 14r. **None** 14s. **None** 14t. **None** 14u. **None** 14v. **None** 14w. **None** 14x. **None** 14y. **None** 14z. **None**  
 15. **William Whyatt** 16. **Delia Besski**  
 FATHER NAME FIRST MIDDLE LAST MOTHER NAME FIRST MIDDLE LAST

17a. **Barbara Cherney** 17b. **Office** 17c. **5061 N. Pulaski Rd. Chicago, IL**  
 18. **Barbara Cherney** 19. **5 Days**  
 18 PART I: Enter the date(s) or condition(s) that caused the death. Do not enter the name of organ, such as cardiac or hepatic, or vessel, or heart failure. List only one cause on each line.  
 (a) **Bilateral Bronchopneumonia**  
 (b) **Due to or as consequence of**  
 (c) **Due to or as consequence of**

PART II. Other significant conditions contributing to death but not resulting in the underlying cause (General Part I)  
**Alzheimers Disease**  
 DATE OF OPERATION IF ANY: **200** MAJOR FINDINGS OF OPERATION: **Alzheimers Disease**

20a. **NO** 20b. **NO** 20c. **NO** 20d. **NO**  
 21a. **Sept. 24, 1991** 21b. **NO** 21c. **6:50 P. M.**  
 TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED

22a. **Stephan Dubala, 5055 N. Pulaski Rd. Chicago, Ill.** 22b. **60630** 22c. **Sept. 26, 1991**  
 NAME AND ADDRESS OF CENTER (TYPE OF INSTITUTION) TYPE OF INSTITUTION ILLINOIS LICENSE NUMBER

23. **Evergreen** 24. **Evergreen** 25. **Illinois** 26. **Sept. 28, 1991**  
 FUNERAL HOME NAME STREET AND NUMBER OR RFD CITY OR TOWN STATE DATE MONTH DAY YEAR

27. **Evergreen** 28. **Illinois** 29. **Sept. 28, 1991**  
 FUNERAL HOME NAME STREET AND NUMBER OR RFD CITY OR TOWN STATE DATE MONTH DAY YEAR

30. **Illinois** 31. **Sept. 28, 1991**  
 FUNERAL HOME NAME STREET AND NUMBER OR RFD CITY OR TOWN STATE DATE MONTH DAY YEAR



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 APPLIED.

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