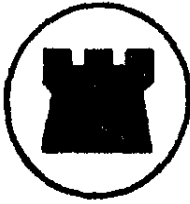


UNOFFICIAL COPY



ALBERT S. GEORGE, JR
417 LATHROP AVE.
RIVER FOREST, IL 60305-1809



CHICAGO TITLE INSURANCE COMPANY

93008975

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF

ss.

Order No. _____

KEITH F. ACHUFF

being duly sworn

states that he resides at 119 Circle Avenue in the City of
Village of Forest Park, Illinois

That he was acquainted with MARIE L. ACHUFF

deceased who, at the time of her death, was one of the owners of the land in Cook
County, Illinois, described as:

Lot Twenty (excepting therefrom the South One Hundred Twenty One (121) feet
thereof as measured on the west line thereof (20) in Block One (1), in the
Subdivision by the Chicago and North Western Railway Company of part of the
reservation for railroad purposes as shown on Plat of railroad addition to
the town of Harlem in the Southeast Quarter (1/4) of Section 12, Township 39
North, Range 12, East of the Third Principal Meridian, according to the
Plat recorded November 14, 1881, as Document Number 358829.

Street Address: 119 Circle Avenue, Forest Park, Illinois

Permanent Real Estate Index No. 15-12-09-023-0000

That the deceased died August 19, 1992 as evidenced by a
certified copy of death certificate of the deceased attached hereto. DEPT-11 RECORD - 1 \$23.50
T86666 TRAN 5094 01/06/93 13:05:00
#6137 # *-93-008975

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 One Hundred Fifty Thousand (\$150,000.00) dollars.

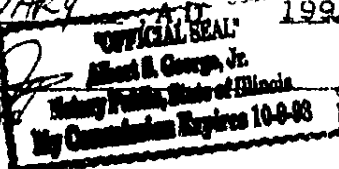
Affiant makes this affidavit for that purpose of inducing the Chicago Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to before me by the said

KEITH F. ACHUFF

this 6th day of JANUARY 1993

Notary Public



Keith F. Achuff

(affiant's signature)

93008975

23 50
7M

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[Handwritten scribble]

23008372

Property of Cook County Clerk's Office

23008372

[Handwritten signature]

OFFICIAL
Albert S. George
State of Illinois
My Commission Expires 10-31-08

63008975

1. HENRY CENITY THAT the foregoing is a true and correct copy of the death record for the decedent named at 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, marriages and deaths.

I have reviewed this death record for the decedent named at item 1 and find that it complies with the provisions of the Illinois statutes relating to the registration of births, marriages and deaths. I have also reviewed the medical certificate for the decedent named at item 1 and find that it complies with the provisions of the Illinois statutes relating to the registration of births, marriages and deaths.

I, the undersigned, am a duly qualified and licensed Health Officer of the State of Illinois and am duly sworn to perform the duties of my office as such.

COX PATE, Illinois
Local Registrar

SIGNED: *[Signature]*

DATE: Aug 21 1992

PRINTED BY AUTHORITY OF THE STATE OF ILLINOIS

REGISTRATION
DISTRICT NO. 1091
REGISTERED
NUMBER 613

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH
STATE FILE NUMBER

DECESSED-NAME Maria		FIRST		MIDDLE		LAST		SEX	DATE OF DEATH MONTH DAY YEAR	
1. COUNTY OF DEATH Cook		AGE-LAST BIRTHDAY 58 69		2. UNDER 1 YEAR MONTHS DAYS		3. UNDER 1 DAY HOURS MIN		Female	19. 1992	
4. CITY, TOWN, TWP. OR ROAD DISTRICT NAME Dak Park		5a. HOSPITAL OR OTHER INSTITUTION West Suburban Hospital Medical Center		5b. DATE OF BIRTH 30, 1923		6. DATE OF DEATH MONTH DAY YEAR				
7. PLACE OF BIRTH AND STATE OR FOREIGN COUNTRY Maywood IL		8a. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED, SEPARATE		8b. MARRIED Married		9. HUSBAND'S NAME Keith Achuff				
8. SOCIAL SECURITY NUMBER 10 328-18-4648		9a. USUAL OCCUPATION the Manager		9b. BUSINESS OR INDUSTRY OFFICE		10. EDUCATIONAL LEVEL 12		11. HOSPITAL OR OTHER INSTITUTION West Suburban Hospital Medical Center		
9. RESIDENCE STREET ADDRESS 119 Circle Avenue		CITY, TOWN, TWP. OR ROAD DISTRICT NO. Forest Park		INSIDE CITY Yes		COUNTRY Cook				
10. STATE Illinois		ZIP CODE 60130		RACE (IF NOT BLACK, AMERICAN INDIAN, OR WHITE) WHITE		14b. FEMALE OR MALE? <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE				
11. FATHER-NAME FIRST Bill		MIDDLE Schallau		LAST Youngquist		14c. SPECIFY: MOTHER-NAME FIRST Maria				

17a. PART I: **Mia KEYS**

17b. RECORDS: **17c. Erie At Austin, Oak Park IL 60302**

17d. RELATIONSHIP: **17e. Youngquist**

17f. ADDRESS (STREET AND BOX NO. IF CITY OR TOWN STATE ZIP): **17g. RECORDS**

18. PART II: **Diabetes, Mellitus, Arteriosclerotic Vascular Disease**

19a. DATE OF OPERATION, IF ANY: **20c. 1992**

19b. HOSPITAL OR OTHER CENTER: **20d. 1992**

19c. SURVIVAL: **20e. 1992**

19d. SURVIVAL (MONTHS): **20f. 1992**

19e. SURVIVAL (DAYS): **20g. 1992**

21a. SIGNATURE: **21b. August 19, 1992**

21c. NAME AND ADDRESS OF CENTER: **21d. August 20, 1992**

21e. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CENTER: **21f. 036-081440**

21g. TIME AND PLACE AND DUE TO THE CAUSE(S) STATED

21h. DATE SIGNED: **21i. 3:45**

22a. LOCATION: **22b. 2408/22/92**

22c. CITY OR TOWN: **22d. Illinois**

22e. STATE: **22f. 60130**

22g. FUNERAL HOME: **22h. 60130**

22i. FUNERAL DIRECTOR'S SIGNATURE: **22j. 60130**

22k. STREET AND NUMBER OR RFD: **22l. 60130**

23a. LOCAL REGISTRY SIGNATURE: **23b. 034-012259**

23c. DATE FILED BY LOCAL REGISTRY: **23d. 1992**

23e. DATE FILED BY LOCAL REGISTRY: **23f. 1992**

24a. FUNERAL HOME: **24b. 2408/22/92**

24c. CITY OR TOWN: **24d. Illinois**

24e. STATE: **24f. 60130**

24g. FUNERAL HOME: **24h. 60130**

25a. LOCAL REGISTRY SIGNATURE: **25b. 034-012259**

25c. DATE FILED BY LOCAL REGISTRY: **25d. 1992**

25e. DATE FILED BY LOCAL REGISTRY: **25f. 1992**

PROPERTY

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93006915

Property of Cook County Clerk's Office