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Chicago Title Insurance Company

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF _____

Order No. _____

MAIL TO SHIRLEY FOSTER being duly sworn,
she resides at 1627 N. Mason Avenue in the City of Chicago, Illinois

That she was acquainted with WILLIAM FOSTER

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

Lot 31 in Block 2 in Mill & Son's Subdivision in the Southeast 1/4 of Section 32, Township 40 North, Range 11, East of the Third Principal Meridian, according to the Plat thereof recorded June 22, 1922 as document No. 7549588, in Cook County, Illinois.

DEPT-01 RECORDING \$23.50
T#3333 TRAN 8414 02/16/93 11:08:00
#6391 # *-93-118671
COOK COUNTY RECORDER

P.I.N. 13-32-411-011

Commonly known as 1627 N. Mason Ave. Chicago, Illinois 60639.

That the deceased died August 3, 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 \$5,000.00. 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

SHIRLEY FOSTER

OFFICIAL SEAL
JOY SPIROVITZ
NOTARY PUBLIC STATE OF ILLINOIS
MY COMMISSION EXP. JUNE 19, 1995

this 10th day of February, A.D. 19 93.

[Signature]
Notary Public

[Signature]
(affiant's signature)

2350
02/16/93

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State of Illinois
County of Cook



Property of Cook County Clerk's Office

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I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named on 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.

OCT 07 1992

Oak Park, Ill.

SIGNED

LOCAL REGISTRAR

The original record of this death is permanently filed with the ILLINOIS DEPARTMENT OF PUBLIC HEALTH in Springfield. County clerks and local registrars are authorized to make certifications from copies of the original record. The Illinois statutes provide that the certification of a death record by the Department of Public Health or the local registrar or the county clerk shall be prima facie evidence in all courts and places of the facts therein stated.

REGISTERED NUMBER 583	CASE #: 48 AUG 1992	MEDICAL EXAMINER'S CORONER'S CERTIFICATE OF DEATH
DECLASSIFIED NAME 1 WILLIAM FOSTER	SEX 2 MALE	DATE OF BIRTH AUG 3, 1992
COUNTY OF DEATH COOK	HOSPITAL OR OTHER INSTITUTION WEST SUBURBAN HOSPITAL	DATE OF DEATH AUG 16, 1992
117 TOWN, VILL OR ROAD DISTRICT NUMBER COOK	DATE OF BIRTH 26	DATE OF DEATH 54 AUG 16, 1965
6a OAK PARK	60 WEST SUBURBAN HOSPITAL	5c ER
7 CHICAGO, IL	5d NEVER MARRIED	5e NO
10. 338-64-0229	11a LABORER	11b GENERAL
13a 627 N MASON STREET	11c CHICAGO	12. 12
13b ILLINOIS	14a BLACK	13c. YES
15 DAVID FOSTER	16 SHARLET HEARD	13d COOK
17a PEGGY SCHWARTZ	17c CHICAGO, IL 60612	
18 PART 1	19a MED REC	
19a ACCIDENT	19b DRUG OVERDOSE	
20a NO	20b CHICAGO, COOK, IL	
21a	21b AUG 3, 1992	21c 4:22 PM
22a	22b AUG 28, 1992	
23a MITRA B KALELKAR, M.D.	23b AUG 28, 1992	
24a BURIAL	24b HILLSIDE, ILLINOIS	24d AUG 3, 1992
25a WALLACE WEST END F.H.	25b CHICAGO, ILLINOIS 60644	
25c		
25d		
25e		
25f		

William West End Funeral Home
David Foster
Robert J Stein, M.D.
Aug 28, 1992
34-9351

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Property of Cook County Clerk's Office