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JOINT TENANCY AFFIDAVIT

TO 1408 TTI (6-93) IL

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STATE OF ILLINOIS  
COUNTY OF Cook ORDER NO. \_\_\_\_\_  
DATE: \_\_\_\_\_

ss. mail TO

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Delois Washington, hereinafter referred to as the affiant deposes and states that the affiant resides at 14822 Robey, in the City of Harvey;

That the decedent at the time of his/her death was one of the owners of the property in Cook County, Illinois, legally described as follows:

LOT ELEVEN(11) (EXCEPT THE NORTH 1/3 THEREOF) AND ALL OF LOT TWELVE(12) IN BLOCK 168, IN HARVEY, A SUBDIVISION IN THE NORTHEAST QUARTER OF THE SOUTHWEST QUARTER OF SECTION 7, TOWNSHIP 36 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

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COOK COUNTY, ILLINOIS  
FILED FOR RECORD

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That said decedent died on 3/16/92 leaving no/a last will and testament;

That the total value of the estate of said decedent including his/her taxable interest in the above real estate is \$ 55000;

That the Illinois Inheritance Tax and the Federal Estate Tax, if any was due from the decedent's estate, has been paid in full;

That the affiant makes this affidavit to induce TICOR TITLE INSURANCE COMPANY to issue its Policy of Title Insurance on the above described property.

Signature Delois Washington

SUBSCRIBED AND SWORN TO before me  
this 9th day of October, 19 94  
a Notary Public in and for said State and County.  
Sherrie Power

NOTE: If the decedent left a will it will be necessary that the original or a certified copy thereof be presented to us for inspection.

A death certificate together with evidence of payment of death taxes, if any, should accompany this affidavit.

BOX 333-CTI

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Property of Cook County Clerk's Office

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REGISTERED NUMBER 16.10

MEDICAL EXAMINER'S - CORONER'S CERTIFICATE OF DEATH 4911303

STATE OF ILLINOIS COUNTY OF COOK CITY OF CHICAGO

MAR 18 1992

I, VIRGINIA L. PARKER, M.B.A. LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS ON 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.

Signature of Registrar: Virginia L. Parker LOCAL REGISTRAR

THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

Form with fields for DECEASED NAME (Ernest J. Washington Jr.), DATE OF DEATH (Mar. 16, 1992), PLACE OF BIRTH (Chicago), OCCUPATION (Minister), CAUSE OF DEATH (Arteriosclerotic Cardiovascular Disease), and SIGNATURE (R. Nancy Jones, M.A.).

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