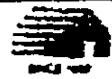


UNOFFICIAL COPY

REI REAL ESTATE INDEX

1820 RIDGE AVENUE  
EVANSTON, IL 60201-3631  
708 864-9000 FAX 708 861-8877



DECEASED JOINT TENANCY AFFIDAVIT

95215092

STATE OF ILLINOIS  
COUNTY OF

ss.

Order No. 222514

GREGORY WILSON

being duly sworn

states that HE resides at 1154 S. HIGHLAND AVENUE in the City of OAK PARK

That HE was acquainted with ELAINE D. WILSON deceased who, at the time of HER death, was one of the owners of the land in COOK

County, Illinois, described as:

N 9 FEET OF LOT 89, LOT 90 IN BELFELD'S ADDITION SOUTH RIDGELAND, IN THE SW 1/4 OF SECTION 17, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, SITUATED IN THE VILLAGE OF OAK PARK, COUNTY OF COOK, IN THE STATE OF ILLINOIS

P.I.N.# 16-17-326-003

DEPT-11 RECORD FOR \$23.50  
150013 TRAM 3504 03/30/95 10:32:00  
\$7454 & CT \*-95-215092  
COOK COUNTY RECORDER

That the deceased died AUGUST 31, 1991, 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 \$ 125,000 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.

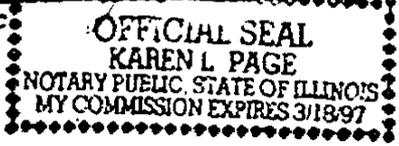
Subscribed and sworn to before me by the said

GREGORY WILSON

this 10TH day of MARCH, A.D. 19 95

*Karen L. Page*

Notary Public



*[Signature]*  
(Affiant's Signature)

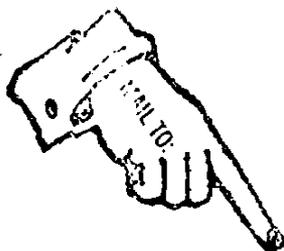
RTS-1608  
REI TITLE SERVICES #

# UNOFFICIAL COPY

11  
11

11/11/11

Property of Cook County Clerk's Office



260072556

Mailed to  
COMMERCIAL TRUST BANK OF BERWYN  
3322 S. CAK PARK AVE  
BERWYN  
ATTN: JAMES A CAIRO

STATE OF ILLINOIS

MEDICAL CERTIFICATE OF DEATH

DECEASED NAME: ELAINE D WILSON

DATE OF DEATH: AUGUST 31, 1991
COUNTY OF DEATH: COOK
DATE OF BIRTH: MARCH 20, 1920
SEX: FEMALE

HOSPITAL OR OTHER INSTITUTION: OAK PARK HOSPITAL
NAME OF SURVIVING SPOUSE: NONE
MARRIED NEVER MARRIED: MARRIED
WIDOWED DIVORCED (SPECIFY): MARRIED

FATHER: MISCHECK
MOTHER: N/A
MARRIAGE ADDRESS: 172 520 S. MAPLE AV., OAK PARK, ILL. 60304

CAUSE OF DEATH: CORONARY HEART DISEASE
IMMEDIATE CAUSE: HEART FAILURE
UNDERLYING CAUSE: CORONARY HEART DISEASE

DATE OF OPERATION: 6-14-71
FINDINGS OF OPERATION: SAME
SIGNATURE: JOHN CAVENAGH M.D.

DECEASED: ELAINE D WILSON
FATHER: MISCHECK
MOTHER: N/A
MARRIAGE ADDRESS: 172 520 S. MAPLE AV., OAK PARK, ILL. 60304

CAUSE OF DEATH: CORONARY HEART DISEASE
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DECEASED: ELAINE D WILSON
FATHER: MISCHECK
MOTHER: N/A
MARRIAGE ADDRESS: 172 520 S. MAPLE AV., OAK PARK, ILL. 60304

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named on item 3 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 deaths.

DATE: SEP 04 1991
LOCAL REGISTRAR: [Signature]
OFFICIAL TITLE: 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 statute provides that the contents of a death record by the Department of Public Health or the county clerk shall be prima facie evidence in all courts and places of the facts therein stated.

UNOFFICIAL COPY

Property of Cook County Clerk's Office