

# UNOFFICIAL COPY

96446501

## DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS  
COUNTY OF Cook

} as.

Rose Marie Donald being duly sworn  
states that she resides at 5002 N. Woodlawn in the City of  
Chicago

That she was acquainted with Robert E. Donald  
deceased who, at the time of death, was one of the owners of the land in Cook  
County, Illinois, described as:

LOT TWENTY EIGHT (28) 96446501

in Foster-Harlem Resubdivision of parts of Blocks 3, 6 and 7, and all of Blocks 1, 8, 9 and 10 in Volk  
Bros.' Greater Harlem Avenue Subdivision of the Northwest Quarter (1/4) of the Southwest Quarter (1/4)  
of Section 7, Township 49 North, Range 13, East of the Third Principal Meridian, in Cook County  
Illinois, according to the Plat thereof recorded July 27, 1950, as Document No. 14861751 in Book 384 of  
Plats, Page 32.

P.P.S.

13-07-313-065 12-2-94

That the deceased died 12-2-94, 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 \_\_\_\_\_ 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

Rose Marie Donald

OFFICIAL  
GARY DEGRAFF  
NOTARY PUBLIC, STATE OF ILLINOIS  
MY COMMISSION EXPIRES 12/14/99

this 11 day of Jan, A.D. 19 94

[Signature]  
NOTARY PUBLIC

[Signature]  
(Affiant's signature)



REGISTRATION DISTRICT NUMBER 16.10

STATE OF ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 622177

DECEASED NAME FIRST MIDDLE LAST PATRICK B. DONALD
COUNTY OF DEATH COOK
DATE OF DEATH MONTH DAY YEAR December 2, 1994
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER 4. COOK

6a. CHICAGO
BIRTHPLACE CITY AND STATE OR FOREIGN COUNTRY
7. Atlanta, Georgia
8b. Rose Marie Schwaller
NAME OF SURVIVING SPOUSE (MARRIAGE, WIDOWED, DIVORCED, IMPRISONED)
11a. CPA
USUAL OCCUPATION
13a. Illinois
CITY, TOWN, TWP. OR ROAD DISTRICT NO. 13b. Chicago
13c. Yes
INSIDE CITY (YES/NO)
14b. White
RACE (WHITE, BLACK, AMERICAN INDIAN OR ISPECIFY)

15. Eugene Donald
INFORMANT'S NAME (TYPE OR PRINT)
17a. Rose Marie Donald
RELATIONSHIP
17b. Wife
17c. 5008 N. Nordica, Chicago, Illinois 60656
MOTHER-NAME FIRST MIDDLE LAST Sarah Karl

18. PART I. Enter the disease or complication that caused the death. Do not enter the mode of death, such as cardiac or respiratory arrest.
Immediate Cause (final disease or condition resulting in death)
(a) Pneumonia, Bilateral
DUE TO, OR AS A CONSEQUENCE OF
(b)
DUE TO, OR AS A CONSEQUENCE OF
(c)
CONDITIONS, IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE (S) STATING THE UNDERLYING CAUSE LAST.

PART II. On or immediately preceding the day of death, but resulting in the underlying cause of death, if any.
DATE OF OPERATION, IF ANY
20b.
MAJOR FINDINGS OF OPERATION
20c.
WAS CORONER OR MEDICAL EXAMINER NOTIFIED (YES/NO)
21a. December 2, 1994
DATE SIGNED
21c. 10:37 A. M
HOUR OF DEATH

22a. Signature of Stephen A. Galens
NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT)
22c. Stephen Galens, 5841 S. Maryland, Chicago, Illinois 60637
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)
22d. 036-086449
ILLINOIS LICENSE NUMBER
NOTE: IF AN INQUIRY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED

23.
24a. Cremation
CEMETERY OR CREMATORY NAME
24b. Cremation Services
LOCATION
24c. Rosemont, Illinois
STATE
24d. Dec. 3, 1994
DATE (MONTH, DAY, YEAR)

UNOFFICIAL COPY

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

DEC - 5 1994

I, SHEILA LYNE, RSW, LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, BIRTHS 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.

622177

THIS CERTIFIED COPY VALID WHEN MULTICOLORED SIGNATURE SEAL IS APPLIED.

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Property of Cook County Clerk's Office

98-146301