

UNOFFICIAL COPY

State of Illinois)
County of Cook) SS.

97563479

JOINT TENANCY AFFIDAVIT

DEPT-01 RECORDING \$25.50
T#0015 TRAN 4112 06/09/97 11:21:00
#8669 + CT *-97-407889
COOK COUNTY RECORDER

MARILYNN G. HUGHES, hereinafter referred to as the affiant, states under oath that she resides at 10619 S. Avenue J, Chicago, Illinois; that the affiant was acquainted with GRACE E. SCHWIEMAN that at the time of death, the Decedent was one of the owners of the property, by virtue of properly recorded joint tenancy warranty deed, said property located in Cook County, Illinois and legally described as follows:

DEPT-01 RECORDING \$25.50
T#5555 TRAN 4122 08/04/97 10:04:00
#8109 + JJ *-97-563479
COOK COUNTY RECORDER

97407889

Lots 45 and 46 in Morier's Subdivision of the West 1/2 of the SE 1/4 of the NE 1/4 of the NE 1/4 of Section 18, Township 37 North, Range 15, East of the Third Principal Meridian in Cook County, Illinois.

Common Address: 10707 S. Mackinaw, Chicago, Illinois 60617

26-18-207-003-0000
PIN: 26-18-207-004-0000

RECORDED TO CORRECT LEGAL DESCRIPTION + PIN

That Decedent had no interest in any business or partnership, nor held any power of appointment at death, nor created any remainder interest in property by transfer with retention of a life interest therein or the creation of interests to take effect in possession or enjoyment after death;

The decedent died on March 12, 1983, leaving no last will and testament.;

The total value of the decedent's estate, including the taxable interest in the above property was \$50,000.00, and;

The value of the above property individually was \$25,000.00, and;

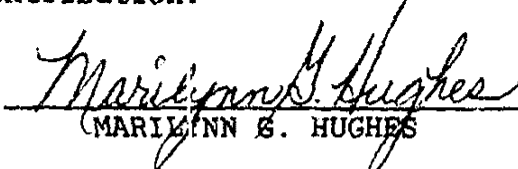
That the affiant makes this affidavit to induce any title insurance company to issue its policy of title insurance on the above described property.

The affiant hereby covenants and agrees for herself to forever fully indemnify, protect, defend and hold any such title company harmless and to reimburse said title insurer for all loss, costs, damages, suits, attorneys's fees and expenses of every kind and nature which it may suffer, expend or incur by reason of the issuance of said policy free and clear of the following objections:

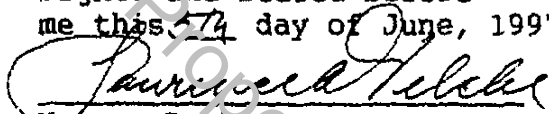
25-50
[Handwritten signature]

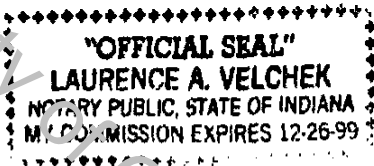
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- a. Claims against the estate of GRACE E. SCHWIEMAN the decedent.
- b. Illinois Inheritance Tax and Federal Tax which may be charged against the estate of the decedent;
- c. Legacies, if any, created by the will of said decedent;
- d. Rights to contribution.


MARILYN E. HUGHES

Signed and sealed before
me this 5th day of June, 1997.


Notary Public



Prepared By:
Laurence A. Velchek
Attorney At Law
9130 S. Houston Avenue
Chicago, Illinois 60617
(773) 375-8750
Attorney Code No. 21257

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Cook County Clerk's Office

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STATE OF ILLINOIS 2000
MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO 6.0	STATE FILE NUMBER
DECEASED - NAME GRACE ELIZABETH SCHWLEMAN	DATE OF DEATH 3 MARCH 12, 1983
1. AGE - MONTHS (OR YEARS) 4b. AMERICAN ORIGIN OR DESCENT 5a. 67 5b. AMERICAN	2. SEX FEMALE
3. RACE WHITE	DATE OF BIRTH (MO., DAY, YEAR) 6 JUNE 29, 1915
4. CITY, TOWN, VILLAGE OR ROAD DISTRICT NUMBER OAK LAWN	7a. COUNTY OF DEATH COOK
7b. HOSPITAL OR OTHER INSTITUTION - NAME (IF NOT IN CITY, TOWN, VILLAGE AND NUMBER) CHRIST HOSPITAL	7d. STATUS INPATIENT
8. CITIZENSHIP U. S. A.	11. NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) ROBERT SCHWIEMAN
9. MARRIAGE STATUS MARRIED	12. U.S. WAR VETERAN NO
10. U.S. BUSINESS OR PROFESSION HOUSEWIFE	13a. NO 13b. YES
11. SOCIAL SECURITY NUMBER 360-30-6068	14a. COUNTY CHICAGO
12. RESIDENCE STREET AND NUMBER 10707 MACKINAW	14b. CITY CHICAGO
13. CITY, TOWN, VILLAGE OR ROAD DISTRICT NO. (IF NOT IN CITY, TOWN, VILLAGE AND NUMBER) CHICAGO	14c. YES 14d. COOK
14. STATE ILLINOIS	14e. STATE ILLINOIS
15. FATHER - NAME ARTHUR SELLERS	MIDDLE AMELIA
16. MOTHER - MAIDEN NAME SELLERS	17. MAILING ADDRESS 4440 W. 95th ST., OAK LAWN, IL. 60453
17a. REGISTERED DEATH RECORDS 17b. RECORDS	17c. 4440 W. 95th ST., OAK LAWN, IL. 60453
18. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (a) CORONARY THROMBOSIS (b) ARTERIOSCLEROTIC HEART DISEASE (c) OTHER SIGNIFICANT CONDITIONS (CO-EXISTING CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I)	19a. AUTOPSY (YES OR NO) NO
19b. 19c. 19d. 19e. 19f. 19g. 19h. 19i. 19j. 19k. 19l. 19m. 19n. 19o. 19p. 19q. 19r. 19s. 19t. 19u. 19v. 19w. 19x. 19y. 19z.	19b. 19c. 19d. 19e. 19f. 19g. 19h. 19i. 19j. 19k. 19l. 19m. 19n. 19o. 19p. 19q. 19r. 19s. 19t. 19u. 19v. 19w. 19x. 19y. 19z.
20. DATE OF OPERATION, IF ANY DIABETES MELLITUS	20a. MAJOR FINDINGS OF OPERATION DIABETES MELLITUS
21. DATE OF DEATH MAY 10, 1950	21a. MONTH, DAY, YEAR MAY 10, 1950
22. SIGNATURE David R Cole	22a. DATE SIGNED MARCH 12, 1983
23. NAME AND ADDRESS OF CERTIFIER DAVID R. COLE, MD 5021 W. 95th ST., OAK LAWN, ILL. 60453	23a. ILLINOIS LICENSE NUMBER 31362
24. BIRTHAL MT. HOPE	24a. CITY OR TOWN CHICAGO, ILLINOIS
25. THE CLAUDE E. GRIESEL MORTUARY LTD. 10240 S. EMING AVE. CHICAGO, ILL. 60617	25a. ILLINOIS LICENSE NUMBER 7658
26. LOCAL REGISTRAR'S SIGNATURE James C. Mack	26a. DATE SIGNED BY LOCAL REGISTRAR March 15, 1983

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

Date **MAR 18 1983**

Signed *Nedra McCarty*

At Cook County Department of Public Health 1500 S. Maybrook Drive
Official Title Chief Deputy Registrar
Maywood, Illinois 60153

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