

CHICAGO TITLE INSURANCE COMPANY

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS  
COUNTY OF

ss.

Order No. \_\_\_\_\_

JUDITH C. GRADY

being duly sworn

states that I resides at 113 TIMBERLINE DRIVE in the City of LEMONT

That I was acquainted with ROBERT L. GRADY

deceased who, at the time of HIS death, was one of the owners of the land in COOK County, Illinois, described as: LOT 6 IN TIMBERLINE UNITS II & III-PHASE I-A, BEING A RESUBDIVISION OF LOTS 1 THROUGH 59, LOTS 100 THROUGH 104, AND LOTS 128 THROUGH 134, ALL INCLUSIVE, ALL IN TIMBERLINE UNITS II & III-PHASE 1, BEING A RESUBDIVISION OF LOTS 4 AND 5 AND PARTS OF LOTS 6, 7, 8, 9 AND 10 IN COUNTY CLERK'S DIVISION OF SECTION 30, TOWNSHIP 37 NORTH, RANGE 11 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 22-20-404-011

ADDRESS: 113 TIMBERLINE DRIVE, LEMONT, IL.

That the deceased died DECEMBER 15, 1997, as evidenced by a certified copy of death certificate of the deceased attached hereto.

That the deceased died:

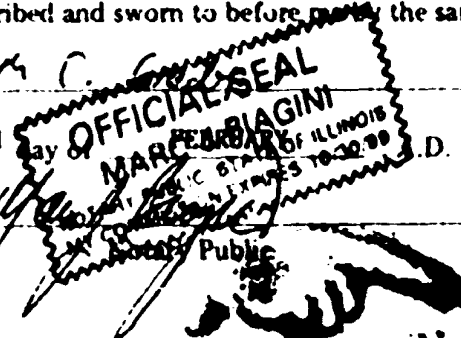
- Leaving no Last Will & Testament.
- Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven will should be filed with the Clerk of the Probate Division of the Circuit Court of \_\_\_\_\_ County, Illinois.
- Leaving a Last Will & Testament which was filed in 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 ONE HUNDRED 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, the said

x Judith C. Grady  
this 12TH day of \_\_\_\_\_ A.D. 1998



Judith C. Grady  
Affiant's signature

101 PARK RIDGE PARKWAY, SUITE 204  
ROCK MOUNTAIN, IL 60521

UNOFFICIAL COPY

Property of Cook County Clerk's Office

90107100

STATE OF ILLINOIS

MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 16.0	REGISTERED NUMBER	DECLARED NAME	SEX	AGE LAST BIRTHDAY	DATE OF BIRTH	DATE OF DEATH	MONTH	DAY	YEAR
		Robert L. Grady	M	60	June 20th 1937	December 15th 1997			
OCCUPATION		MARITAL STATUS		EDUCATION		MANNER OF DEATH			
Cook		Married		High School		Natural			
RESIDENCE		PREVIOUS RESIDENCES		CITY		COUNTY			
113 Timberline Drive		113 Timberline Drive		Chicago, Illinois		Cook			
STATE		RACE		HAIR		EYES			
Illinois		White		Brown		Blue			
FATHER'S NAME		MOTHER'S NAME		BIRTH		MARRIAGE			
Harry Grady		Jewel Wilhelm		1903		1937			
DECEASED NAME		DECEASED ADDRESS		CITY		STATE			
Judith Grady		933 Timberline Dr.		Lemont, Ill.		60439			
<p>1. Cause of death (to be filled in by physician or coroner)</p> <p>(a) <u>Aspiration pneumonia</u></p> <p>(b) <u>Secondary</u></p> <p>(c) <u>S. K. pneumonia</u></p> <p>(d) <u>Septicemia</u></p> <p>(e) <u>Septic shock</u></p> <p>(f) <u>Sepsis</u></p> <p>(g) <u>Sepsis</u></p> <p>(h) <u>Sepsis</u></p> <p>(i) <u>Sepsis</u></p> <p>(j) <u>Sepsis</u></p> <p>(k) <u>Sepsis</u></p> <p>(l) <u>Sepsis</u></p> <p>(m) <u>Sepsis</u></p> <p>(n) <u>Sepsis</u></p> <p>(o) <u>Sepsis</u></p> <p>(p) <u>Sepsis</u></p> <p>(q) <u>Sepsis</u></p> <p>(r) <u>Sepsis</u></p> <p>(s) <u>Sepsis</u></p> <p>(t) <u>Sepsis</u></p> <p>(u) <u>Sepsis</u></p> <p>(v) <u>Sepsis</u></p> <p>(w) <u>Sepsis</u></p> <p>(x) <u>Sepsis</u></p> <p>(y) <u>Sepsis</u></p> <p>(z) <u>Sepsis</u></p>									
<p>2. Conditions, if any, which gave rise to immediate cause (to be filled in by physician or coroner)</p> <p>(a) <u>Septicemia</u></p> <p>(b) <u>Sepsis</u></p> <p>(c) <u>Sepsis</u></p> <p>(d) <u>Sepsis</u></p> <p>(e) <u>Sepsis</u></p> <p>(f) <u>Sepsis</u></p> <p>(g) <u>Sepsis</u></p>									
<p>3. Cause of death (to be filled in by physician or coroner)</p> <p>(a) <u>Aspiration pneumonia</u></p> <p>(b) <u>Septicemia</u></p> <p>(c) <u>Sepsis</u></p> <p>(d) <u>Sepsis</u></p> <p>(e) <u>Sepsis</u></p> <p>(f) <u>Sepsis</u></p> <p>(g) <u>Sepsis</u></p> <p>(h) <u>Sepsis</u></p> <p>(i) <u>Sepsis</u></p> <p>(j) <u>Sepsis</u></p> <p>(k) <u>Sepsis</u></p> <p>(l) <u>Sepsis</u></p> <p>(m) <u>Sepsis</u></p> <p>(n) <u>Sepsis</u></p> <p>(o) <u>Sepsis</u></p> <p>(p) <u>Sepsis</u></p> <p>(q) <u>Sepsis</u></p> <p>(r) <u>Sepsis</u></p> <p>(s) <u>Sepsis</u></p> <p>(t) <u>Sepsis</u></p> <p>(u) <u>Sepsis</u></p> <p>(v) <u>Sepsis</u></p> <p>(w) <u>Sepsis</u></p> <p>(x) <u>Sepsis</u></p> <p>(y) <u>Sepsis</u></p> <p>(z) <u>Sepsis</u></p>									
DATE OF OPERATION, IF ANY		MARKED IMPROPER OR UNLAWFUL		DATE OF DEATH		DATE OF DEATH			
SIGNATURE OF PHYSICIAN OR CORONER		SIGNATURE OF REGISTRAR		DATE		DATE			
<u>Walter D. Jones</u>		<u>Nick Charatell</u>		<u>12/17/97</u>		<u>12/15/97</u>			
NAME AND ADDRESS OF PHYSICIAN OR CORONER		NAME AND ADDRESS OF REGISTRAR		CITY		CITY			
<u>1545 S. 5th St. Harvey, Illinois 60926</u>		<u>933 Timberline Dr. Lemont, Ill. 60439</u>		<u>Harvey, Illinois</u>		<u>Lemont, Illinois</u>			
NAME OF ATTENDING PHYSICIAN OR CORONER		NAME OF REGISTRAR		CITY		CITY			
<u>Walter D. Jones</u>		<u>Nick Charatell</u>		<u>Harvey, Illinois</u>		<u>Lemont, Illinois</u>			
LOCAL HEALTH DEPARTMENT		LOCAL HEALTH DEPARTMENT		CITY		CITY			
<u>1010 Lake Street, Oak Park, Illinois 60301</u>		<u>1010 Lake Street, Oak Park, Illinois 60301</u>		<u>Oak Park, Illinois</u>		<u>Oak Park, Illinois</u>			
LOCAL HEALTH DEPARTMENT		LOCAL HEALTH DEPARTMENT		CITY		CITY			
<u>1010 Lake Street, Oak Park, Illinois 60301</u>		<u>1010 Lake Street, Oak Park, Illinois 60301</u>		<u>Oak Park, Illinois</u>		<u>Oak Park, Illinois</u>			

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

Date December 17, 1997

Signed Nick Charatell

At Cook County Department of Public Health Official Title Chief Deputy Registrar, 1010 Lake Street, Oak Park, Illinois 60301

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