



UNOFFICIAL COPY

CHICAGO TITLE INSURANCE COMPANY

171 N. CLARK STREET, CHICAGO, IL 60601

DECEASED JOINT TENANCY AFFIDAVIT



99615111

STATE OF ILLINOIS
COUNTY OF Cook

} ss.

Order No.:

Mildred Thomas

being duly sworn states that she resides at 7646 W. 63rd Place
in the City of Summit, Illinois 60501That she was acquainted with Wallace Thomas deceased who, at the time of death,
was one of the owners of the land in Cook County, Illinois, described as:

Lot 47 in Block 3 in Corn Products Subdivision of part of the North
1,043 feet of Section 24, Township 38 North Range 12, East of the
Third Principal Meridian, situate in the City of Summit, County of
Cook, State of Illinois, together with all appurtenances and privileges
belonging or appertaining thereto.

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5950/0059 51 001 Page 1 of 3
1999-06-25 11:57:52
Cook County Recorder 47.50

PIN # 1824102045

That the deceased died April 25, 1999, 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
Fifty Thousand (\$50,000) dollars.

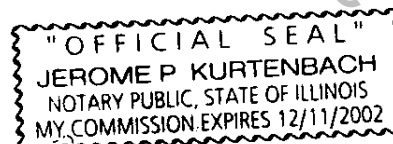
Affiant makes this affidavit for the purpose of inducing Chicago Title Insurance Company to issue its Title Insurance Policy,
describing the above mentioned property.

Subscribed and sworn to before me by the said

Mildred Thomas

this 4th day of June, A.D. 1999

Jerome P. Kurtenbach
Notary Public



Mildred Thomas
(Affiant's Signature)
Mildred Thomas

1. DECEASED-NAME	2. COUNTY OF DEATH	3. CITY, TOWN, TWP. OR ROAD DISTRICT	4. BIRTHPLACE (CITY AND STATE OF FOREIGN COUNTRY)	5. BIRTH DATE	6. SOCIAL SECURITY NUMBER	7. RESIDENCE (STREET AND NUMBER)	8. STATE	9. FATHER-NAME	10. INFORMANT'S NAME (TYPE OR PRINT)	11. IMMEDIATE CAUSE (Final disease or condition resulting in death)	12. CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.	13. NATURAL ACCIDENT, HOMICIDE, SUICIDE, UNDETERMINED, (YES/NO)	14. INJURY AT WORK (YES/NO)	15. PLACE OF FACTORY	16. CERTIFY THAT IN MY OPINION THE INQUIRY INTO THE CAUSE OF DEATH HAS BEEN MADE AND THE CAUSE OF DEATH IS AS STATED.	17. CORONER'S - (NAME AND ADDRESS)	18. CORONER'S PHYSICIAN'S NAME	19. BURIAL, CREMATION, REMOVAL (SPECIFY)	20. FUNERAL HOME	21. HALSTED MEMORIAL	22. FUNERAL DIRECTOR'S SIGNATURE	23. LOCAL REGISTRAR'S SIGNATURE	24. OTHER SIGNATURE
DECEASED-NAME	Cook	Chicago	Chicago	6/11/99	324-12-9715	6517 S. 13th	IL	Alex	Mildred Thomas	Immediate Cause (Final disease or condition resulting in death)	CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.	NATURAL ACCIDENT, HOMICIDE, SUICIDE, UNDETERMINED, (YES/NO)	INJURY AT WORK (YES/NO)	PLACE OF FACTORY	CERTIFY THAT IN MY OPINION THE INQUIRY INTO THE CAUSE OF DEATH HAS BEEN MADE AND THE CAUSE OF DEATH IS AS STATED.	CORONER'S - (NAME AND ADDRESS)	CORONER'S PHYSICIAN'S NAME	BURIAL, CREMATION, REMOVAL (SPECIFY)	FUNERAL HOME	HALSTED MEMORIAL	FUNERAL DIRECTOR'S SIGNATURE	LOCAL REGISTRAR'S SIGNATURE	OTHER SIGNATURE