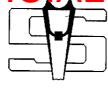
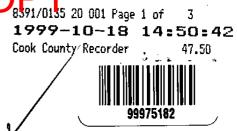
UNOFFICIAL COP\$ 9751



Sanctity of Contract

Stewart Title Company of Illinois



## DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS ) COUNTY OF ( AND ) SS.	STCI File Number: 81885
being duly sworn states that  Deligible Turns and the states of the states that the states of the st	G. Thornton deceased who at the time of death, was one of the
sworn of the land in County, Illinois, describes as:	deceased who, at the time of death, was one of the
25.05.400-019 C	24
That the deceased died 2/24/92 attached hereto.	, as evidenced by a certified copy of death certificate of the deceased
Probate Division of the Circuit Court of Co	ned hereto. The original of the argroven will should be filed with the Clerk of the
That the total value of the estate of the deceased, including both tenancy at the time of the death of the deceased, does not exceed	real and personal property owned by the deceared enthor individually or in joint d the sum ofdollars.
Affiant makes this affidavit for the purpose of inducing Stewart property.	Title Company to issue its Title Insurance Policy., describing the above mentioned
Subscribed and sworn to before me by the said	- نيمير - نيمير
this 16 day of Sextonbera.D. 19 99.  Notary Public	Auen A. alford (Affiant's Signature)

## UNO FEE A GREATER OPY

**EXHIBIT "A"** 

99975182

File No.: 81885

Lot 18 (except the South 30 feet thereof) and the South 20 feet of Lot 19 in Robert Volk's Subdivision of Block 3 in the Subdivision of that part Westerly of the right of way of the Chicago, Rock Island and Pacific Railroad of the South Half of Section 5, Township 37 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

25-05-403-019

STATE OF ILLINOIS County of Cook, County Clork L DAVID D. Onc County Stark a the County of Cook, in the State storetard, and Keepel of the Hecords and Files of said County, do hereby certify that the stached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the nd Keepe of the Hecords and Files of City of Chicago, in said County.

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- 8	-1 DAYID	<u>}</u>	THORNTON	/ 2 MA	LE 3 FEBR	TIADV 24	1002
"	COUNTY OF FATAL	AGE-LAST BIRTHUAY (YRS)	UNDERTYEAR I	UNDER I DAY	EOFBESTH (MONTH, DAY	YEARI	1224
ĺ	4. COOK	5a 6Q	MOS DAYS H 5b. 5e	DURS MIN 5d	71111 20	1000	
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		MARRIED NEVERSONER		JSP, IGSPOUSE (MAIDENN	ANG IS WIFE)	6c. INPT.	
	MISSOUR	WIDOWED, DIVORCED (SPECIFY)	ı	O D. GOOD (MANDERING	Reve. ir veire)	WAST ARM	JEDEVERINUS SGES? (YES NO)
I	SOCIAL SECURITY NUMBER	JA. MARRIED USUAL OCCUPATION	KIND OF BUSINESS			9	YES
	1	RETIRED-	KIND OF BUSINESS	CHINDOSTHY ED	UCATION (SPECIFY ONL) mentary/Secondary (0-12)	HIGHEST GRADE COMP College 11-4 or 5 + 1	1 ETED)
í	10499-32-9516 RESIDENCE (STREET AND NUMBER)	11a. CT. LEL WORKER	1116 U.S S'	1::EL 12		, , , , , , , , , , , , , , , , , , , ,	N.A
•••		CITY	TOWN, TWP, OR RO	AD DISTRICT NO.	INSIDE CITY (YES:NO)	COUNTY	
• • • •	13a 9155 S. RACI	NE 13b.	CHICAG	n IL	130 VES	13d. COOK	
- 1	STATE ZÎP CODE	RACE (WH'/E, BLACK, AN INDIAN, 616) (CPECIFY)	MERICAN OF HIS	PANIC ORIGIN? ISPEC	OFT NO OR YES IF YES SPEC	FYCUBAN MEXICAN PU	EPTORICAN etc.)
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		IDOLE LAS		ER-NAME FIRST	MIDDLE	(MAIDEN)	LACT
	15. PHTT.	(MILAD)	TITO I.G	_		(INVENTAL)	LASI
	INFORMANT'S NAME (TYPE OR PRINT)	THOR.	TON 16.	IRM	A TREET AND NO CRIEFO .C	<u>JEAN ST</u>	APEN
	17a. THOY MHODAM	ł					Pi
· · ·			7b. WTTP	1.c 9155	S-RACINE	CHG II.	60620_
-		iseases, or complications that cause it is neart failure. List only one cause on e	ne death, Doir, at en ler h lach line	e mode of dying, such a:	s cardiac or respiratory arri	HE TWEEN CH	MIE INTERVAL MSET AND LEATH
· · ·	Immediate Chase (Final disease or children	0 1 -	5/			-J.	· · · · · · · · · · · · · · · · · · ·
··	resulting in death) (a)	TO, ORAS A CONSEQUENCE OF	Zuamou	25011 C	ercinomo	. 6	425.
	CONDITIONS, IF ANY	11 1		しン			
œ	WHICH GIVE RISE TO (b)  IMMEDIATE CAUSE (a)  DUE	TO OR AS A CONSEQUENCE OF	2cK		• • • • • • • • • • • • • • • • • • • •		
	STATING THE UNDEFILYING	TO CHASA CONSCIUENCE OF		4/	•		1.84 - 1.84
- 1	CAUSE LAST. (c)	·····					
• • •	PART II. Other significant conditions contribute	ng to death out not resulting withe underlying o	ause green in PART I	•	AUTC	WeRE AUTOMOS I MUNICIPAL	AVAILABLE PHICK TO
٠	Malnutrit	Fron Deh	ydraz	1011	19a.	19b.	FREATH WESING
[	DATE OF OPERATION, IF ANY	MAJOR FINDINGS OF OPERATION			FEMAL	E WAS THERE APRICAN	ANCYMERAST
ل		20b.			17) = 6.M	ONTHS? YEST: NOT:	
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	21a.	2-24-92		21b.	THE DI WEST OF	0/ 6	n
Î	TO THE BEST OF MY KNOWLEDGE OF	PHOCOURREDAT THE TIME, DATE	AND PLACE AND DUE		ATED DATE	SIGNED IMONT	7 M.
R CO	22a. SIGNATURE	n Million	200			ordined packets	H DAY, YEAR)
17 mg	NAME AND ADDRESS OF CERTIFIER	(TYPEORPONT)	7	-	22b	27	73
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~	NAME OF ATTENDING PHYSICIAN IF OT	HER THAN CERTIFIER OY'EC	Olymp	ser Field	5 IL SOURED.	36-04	5718
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- >	<del></del>	ERYOR CREMATORY-NAME			#UST I	ENOTIFIED.	ICAT EXAMINEH
	REMOVAL (SPECIFY)		LOCATION	CITYOR TOWN	STATE	DATE (MONTH	H DAY YEAR)
ı	24a, BURIAL 124b.	BURR OAK	24c. A	SIP, ILL	INOIS	24d FEB	27,1992
V ai	1 OHENAL HOME	NAME STREET AND	C + 9 BO REBMUN	CITY OR T	OWN	STATE	ŽIP
-		CHAPEL INC. 1	0133 S. I	HALSTED C	HTCAGO.	LLINOIS	60628
ı	FUNERAL DIRECTOR SSIGNATURE				FUNERAL DIRECTOR'S ILLI	NOISLICENSE NUMBER	00020
Ų		$\omega_2$			711	1111179	F
	LOCAL REGISTRAR'S SIGNATURE	. // . :-			DATE FILED BY LOCAL BEG	STRAB/MONTH ONE W	EADI
	26a. When	L. Clartabi	le 11	0	1. 1. E		
	VR200 (Rev 5/89)	Illinois Department of Public	Usain D. J.	<u>~</u>	266 T. Du	ary 21	1992

Illinois Department of Public Health - Dirigion of Vital Descrite

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