



UNOFFICIAL COPY CHICAGO TITLE INSURANCE COMPANY

505 E. NORTH AVE., CAROL STREAM, IL 60188



DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF

Mail to:
ss. First American Bank
201 S. State St.
P.O. Box 307
Hampshire, IL 60140

Order No.:

Frances L. Garvin

being duly sworn states that She resides at 2068 W. 75th Pl.
in the City of Chicago

That She was acquainted with Rosie A. Garvin deceased who, at the time of death,
was one of the owners of the land in COOK County, Illinois, described as:

2
P

*Lot 28 in Harry M. Quinn Incorporated subdivision of part
of the Oveeey and Vance subdivision of the South 1/2 of Section 30,
Township 38 North Range 14, East of the Third Principal Meridian,
according to the Plat thereof recorded December 30, 1943 as Document
13200229, in Cook County, Illinois*

Pin # 20-30-321-001-0020

P/A : 2068 W 75th Place Chgo IL 60620

That the deceased died 6-18-74, as evidenced by a certified copy of death
certificate of the deceased attached hereto.

99064576

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 _____

7149/0326 03 001 Page 1 of 2
1999-01-21 12:08:43
Cook County Recorder 43.00

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.

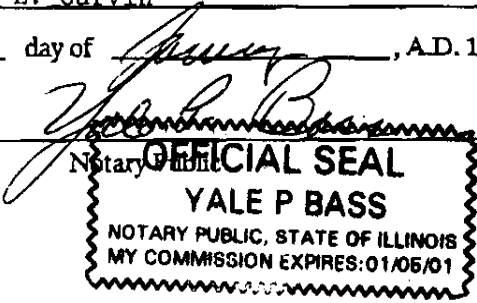
Affiant makes this affidavit for the purpose of inducing Chicago Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

Subscribed and sworn to before me by the said

Frances L. Garvin
this 13th day of January, A.D. 19 99

*mail to prep by
1st American Bk
5000 N. Elston
Chgo IL 60630*

Frances L. Garvin
(Affiant's Signature)



BOX 333-CTI

UNOFFICIAL COPY

I, DAVID D. ORR, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County, do hereby certify that the attached is a true and correct copy of the original record on file, all of which appears from the records and files in my office.

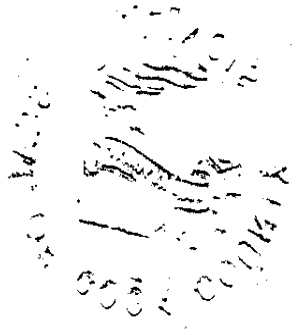
IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the City of Chicago, in said County.

David D. Orr
County Clerk

#469

REGISTRATION DISTRICT NO.	STATE OF ILLINOIS		STATE NUMBER
REGISTERED NUMBER	CORONER'S CERTIFICATE OF DEATH		616112
DECEASED—NAME	FIRST	MIDDLE	LAST
ROSE	ANN	GARVIN	FEINBERG
RACE	AGE—LAST BIRTHDAY (YRS.)	UNDER 1 YEAR	DATE OF BIRTH (MONTH, DAY, YEAR)
4. NEGRO	5a. 65	5b. 5c.	6. 3-26-1909
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER	INSIDE CITY (YES/NO)	HOSPITAL OR OTHER INSTITUTION—NAME	DATE OF DEATH (MONTH, DAY, YEAR)
7b. Chicago	7c. Yes	7d. Pop. Holy Cross Hospital	3. June 19, 1974
BIRTHPLACE (STATE OR FOREIGN COUNTRY)	CITIZEN OF WHAT COUNTRY	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)	NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)
8. Miss	9. USA	10. Widowed	11. None
SOCIAL SECURITY NUMBER	USUAL OCCUPATION	KIND OF BUSINESS OR INDUSTRY	U.S. WAR VETERAN (YES/NO)
12. 36-48-5504	13a. Housework	13b. At Home	13c. No
RESIDENCE	CITY, TOWN, TWP. OR ROAD DISTRICT NO.	INSIDE CITY (YES/NO)	STREET AND NUMBER
14a. Ill	14b. Cook	14c. Chicago	14d. Yes 14e. 2068 W. 75th Pl
FATHER—NAME	MOTHER—MAIDEN NAME	RELATIONSHIP	
15. Lee Andrew	16. Merriweather Not Available	17. Son	
INFORMANT'S SIGNATURE	RELATIONSHIP	MAILING ADDRESS (STREET AND NO. OR R. F. D., CITY OR TOWN, STATE, ZIP)	
17a. <i>Harmon Lawrence</i>	17b. Son	17c. 7800 S. Kenwood Chicago Ill	
18. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE OR LINE FOR (a), (b), AND (c))			APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
PART I. IMMEDIATE CAUSE			UNKWOWN
(a) ORGANIC HEART DISEASE			
(b) DUE TO, OR AS A CONSEQUENCE OF			
(c) DUE TO, OR AS A CONSEQUENCE OF			
PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)			AUTOPSY (YES/NO)
			19a. NO
ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY)	DATE OF INJURY (MONTH, DAY, YEAR)	HOUR	HOW INJURY OCCURRED (ENTER NATURE OF INJURY MENTIONED IN PART I OR PART II ITEM 18)
20a.	20b.	20c. M.	20d.
INJURY AT WORK (YES/NO)	PLACE OF INJURY AT HOME (FARM, STREET, FACTORY, OFFICE BUILDING, ETC. (SPECIFY))	LOCATION	(CITY, VIL. OR TOWN; OR TWP. OR RD. DIST. NO.; COUNTY; STATE)
20e.	20f.	20g.	
I CERTIFY THAT IN MY OPINION, BASED UPON MY INVESTIGATION AND/OR THE INQUIRY, THIS DEATH OCCURRED ON THE DATE, AT THE PLACE AND DUE TO THE CAUSE(S) STATED, AND THAT		THE DECEDENT WAS PRONOUNCED DEAD ON	
21a.		21b. June 19 1974	
CORONER'S SIGNATURE		DATE SIGNED	21c. 2:45 A.M.
<i>Andrew Lawrence</i>		22b. June 19 1974	
CORONER'S PHYSICIAN'S SIGNATURE		DATE SIGNED	
23a. <i>Raymond Green</i>		23b. June 19 1974	
BURIAL, CREMATION, REMOVAL (SPECIFY)	CEMETERY OR CREMATORY NAME	LOCATION	DATE (MONTH, DAY, YEAR)
24a. Burial	24b. Washington	24c. WORTH ILLINOIS	24d. 6-22-1974
FUNERAL HOME	STREET AND NUMBER OR R. F. D.	CITY OR TOWN	STATE
25a. A.R. Leak	7838 S. Cottage Grove	Chicago	Ill 60619
FUNERAL DIRECTOR'S SIGNATURE	FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER		
25b. <i>A.R. Leak</i>	25c. 4390		
LOCAL REGISTRAR'S SIGNATURE	DATE REC'D. BY LOCAL REGISTRAR (MONTH, DAY, YEAR)		
26a. <i>Harvey C. Brown</i>	26b. JUN 20 1974		

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