

Notarized, 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 in this office.

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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.

Stanley T. [Signature]

County Clerk

JUL 24 1989

STATE OF ILLINOIS		STATE FILE NUMBER 602982	
MEDICAL CERTIFICATE OF DEATH			
REGISTRATION DISTRICT NO. 16.10	REGISTERED NUMBER	DECEASED—NAME FIRST MIDDLE LAST SEX Cleo B Threaskill Female	DATE OF DEATH MONTH, DAY, YEAR February 9, 1988
RACE OR COLOR Black		AGE 65	DATE OF BIRTH MONTH, DAY, YEAR December 8, 1922
CITY, TOWN, VILLAGE Chicago		HOSPITAL OR OTHER INSTITUTION Roseland Community Hospital	COUNTY OF BIRTH Cook
CITY, TOWN, VILLAGE Chicago		HOSPITAL OR OTHER INSTITUTION Roseland Community Hospital	PLACE OF BIRTH Inpatient
CITY OF BIRTH Alabama	COUNTRY OF BIRTH USA	MARRIAGE HISTORY Married	NAME OF SURVIVING SPOUSE Frank Threaskill
SOCIAL SECURITY NUMBER 421-22-0218	USUAL OCCUPATION ASST. PRINCIPAL	KIND OF BUSINESS OR INDUSTRY PUBLIC SCHOOL	WAR ON BATES OF SERVICE NO
RESIDENCE STREET AND NUMBER 9636 So. Calumet		CITY, TOWN OR VILLAGE Chicago	COUNTY Cook
FATHER—NAME TOMMY ANDERSON		MOTHER—Maiden Name LILIAN DUNKLIN	
INFORMANT NAME (TYPE OR PRINT) Ms. Laverne Rolland		RELATIONSHIP (S)	MAILING ADDRESS 174 45 W. 111th Street Chicago IL 60628
DEATH WAS CAUSED BY: PART I. IMMEDIATE CAUSE Cardiovascular Distress			APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH 3831150
CONDITIONS, IF ANY, WHICH GIVE RISE TO IMMEDIATE CAUSE (e.g. STROKE, HEART DISEASE, ETC.) acute myocardial infarction, related to GUT infarction			
PART II. OTHER SIGNIFICANT CONDITIONS, INCLUDING CONTRIBUTORS TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I Hypertension, Coronary Insufficiency, Renal Insufficiency			AUTOPSY (YES/NO) NO
DATE OF OPERATION, IF ANY Feb 9, 1988		MAJOR FINDINGS OF OPERATION myocardial infarction	IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? NO
I (DO) (DID NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON Feb 8, 1988		WAS EMPLOYER OR MEDICAL EXAMINER NOTIFIED? NO	HOUR OF DEATH 10:12 AM
TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.			DATE SIGNED (MO., DAY, YR.) Feb 9, 1988
SIGNATURE Rogelio D. Cave, M.D.		ILLINOIS LICENSE NUMBER 96-50530	
NAME AND ADDRESS OF CERTIFIER Dr. Rogelio Cave, M.D. 1209 W. 79th Street, Chicago, IL 60620		NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)	
NOTE: IF AN INQUIRY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.			
METHAL CREMATION, REMOVAL (DISPOSTION) BURIAL		CEMETERY OF CREMATION—NAME LINCOLN	LOCATION WORTH, ILLINOIS
FUNERAL HOME A. A. RAYNER & SONS 318 EAST 71st. STREET CHICAGO, ILLINOIS 60619		DATE (MONTH, DAY, YEAR) FEB 13, 1988	
FUNERAL DIRECTOR'S SIGNATURE Thomas Wright		FUNERAL DIRECTOR'S LICENSE NUMBER 8838	
LOCAL REGISTRAR'S SIGNATURE Louis C. Edwards, M.D., M.P.H.		DATE REC'D. BY LOCAL REGISTRAR (MONTH, DAY, YEAR) FEB 12 1988	

1-015

DECEASED

4905

088

PARENTS

5570 B
427A

CAUSE

401
411

CERTIFIED

DISPOSITION

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03031150

The Affiant, regarding the possible liability for State Inheritance Tax for the Estate of decedent herein, being first duly sworn upon oath, deposes and states as follows:

(1) I am FRANK G. THREALKILL
(name and capacity)

and reside at 9636 S. Calumet, Chicago, IL 60628

(2) I am personally acquainted with the affairs of the Estate of CLEO THREALKILL, who died on February 9, 1988.

(3) That as a consequence, I represent to the Registrar of Titles that regarding Federal Estate Tax or State Inheritance Tax;

(elect one - initial choice)

- 1) that no Tax is due; or _____
- 2) that if any Tax due, there are sufficient other assets to pay such tax; or _____
- 3) that any Tax due has been paid. _____

and I make this affidavit for the purpose of inducing the Registrar of Titles of Cook County, Illinois, to issue a Certificate of Title without additional evidence of non-liability, relying on this statement as true, and in consideration thereof affiant guarantees the truth of the statements herein contained.

Frank G. Threalkill
FRANK G. THREALKILL

Subscribed and sworn to before me this 27th day of July, 1989.

Carl Henry
Notary Public

383150

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Property of Cook County Clerk's Office

Affidavit by Surviving Joint Tenant

L. R. 981677 Doc. No. 1237794-6 Certificate No. 981677

State of ILLINOIS
County of COOK

FRANK G. THREAKILL being first

our sworn, upon oath deposes and says:

That he resides at 9636 S. Calumet in the City of Chicago
and that he is one of the parties who took title, not in tenancy in common, but in joint tenancy,
to real estate shown in Certificate of Title No. 981677 situated in said Cook County, Illinois,
described as follows:

Lot Thirteen (13) in Block Nine (9) in Second Roseland Heights
Subdivision of East Two Thirds (2/3) of the Northwest Quarter (1/4)
of Section 10, Town 37 North, Range 14, East of the Third
Principal Meridian, in Cook County, Illinois.

Affiant states that CLEO B. A. THREAKILL one of the said owners in joint
tenancy, died intestate, in the city (Village) of Chicago in the State of Illinois
as is confirmed by a Certificate of the health department of said municipality hereto attached.

Affiant states that the remaining joint tenant has not changed his marital status since
the issuance of Certificate of Title Number 981677 (except who
has been married but once since acquiring said real estate and then to).

Further, that the affiant makes this affidavit for the purpose of inducing the Registrar of Titles
of Cook County, Illinois, to issue a certificate of title to the surviving Joint Tenant to said above
described premises, relying on this statement as true, and in consideration thereof affiant guarantees
the truth of the statements herein contained.

Frank G. Threackill

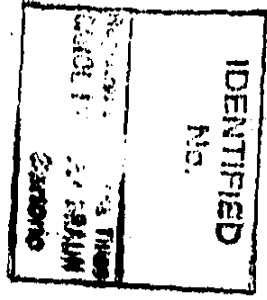
Subscribed and sworn to before me
this 27th day of July 1989

Notary Public signature and title

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3831150
3/15/89
W.P.S.

3831150-6 PR 3 39
CAROL MOSELEY BRADY
REGISTRAR OF TITLES



3831150

C. Keeney

11134 K. M. Oster
6000 S. K.

Property of Cook County Clerk's Office

