

The document(s) attached pertain to real estate located in Cook County, Illinois and described below;



0020593598

(above space for Recorder's use only)

## LEGAL DESCRIPTION:

Unit Number 1400-1W in the Greenwood Inn Condominium, as delineated on a survey of the following described real estate: Lots 7, 8 and 9 in Block 31 in the Village of Evanston, a Subdivision of parts of Section 13, Township 41 North, Range 13 and Sections 7, 18 and 19, Township 41 North, Range 14 East of the Third Principal Meridian, in Cook County, Illinois, which survey is attached as Exhibit "A" to the Declaration of Condominium recorded as Document 26804864 together with its undivided percentage interest in the common elements.

PIN: 11-18-414-022-1005

ADDRESS OF REAL ESTATE: 1400 Hinman - 1W, Evanston, Illinois 60201

Prepared by and MAIL TO:

William A. Pomerantz, 55 East Monroe Street, Suite 3910, Chicago, Illinois 60603

REGISTRATION DISTRICT NO. 16, 23  
REGISTERED NUMBER

UNOFFICIAL COPY MEDICAL CERTIFICATE OF DEATH

20593598

Type or Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS

DECEASED-NAME: Leo Seren, SEX: Male, DATE OF DEATH: January 3, 2002. COUNTY OF DEATH: Cook, BIRTHDAY: MAY 9, 1918. CITY: Evanston, HOSPITAL: Evanston Hospital. BIRTHPLACE: MELROSE, ILLINOIS, OCCUPATION: RESEARCHER. RESIDENCE: 1400 HINMAN-AVE, EVANSTON, COOK.

PARENTS

FATHER: MORRIS SEREN, MOTHER: REBA MALICHOVSKY. INFORMANT: MARIANKA FOUSEK, RELATIONSHIP: Friend, ADDRESS: 1400 HINMAN AVE, EVANSTON, ILLINOIS 60201.

CAUSE

18. PART I. Immediate Cause: Sudden Coronary Heart Failure. DUE TO OR AS A CONSEQUENCE OF: (b) Secondary Amyloidosis. PART II: Bilateral Recurrent Atrial Ectopics.

OPERATION

19. AUTOPSY: No. 20a. DATE OF OPERATION: December 11, 2001. 20b. MAJOR FINDINGS OF OPERATION: Bilateral Recurrent Atrial Ectopics.

CERTIFIER

21a. DATE OF DEATH: December 11, 2001. 21b. WAS CORONER OR MEDICAL EXAMINER NOTIFIED? Yes. 21c. HOUR OF DEATH: 8:41p M. 22a. SIGNATURE: Philip W. Sherod, MD. 22b. DATE SIGNED: January 4, 2002. 22c. NAME AND ADDRESS OF CERTIFIER: 675 W. North Ave Suite 214 Melrose Park, Ill. 60160.

DISPOSITION

23. BURIAL, CREMATION, REMOVAL (SPECIFY): BURIAL. 24a. WESTLAWN CEMETERY, 24b. CHICAGO, ILLINOIS, 24c. JAN. 6, 2002. 25a. WEINSTEIN FAMILY SERVICES 111 SKOKIE BLVD. WILMETTE, ILLINOIS 60091. 25b. FUNERAL DIRECTOR'S SIGNATURE: Humberto Garcia. 25c. 034-015761. 26a. LOCAL REGISTRAR'S SIGNATURE: Jay W. Torrey. 26b. DATE FILED BY LOCAL REGISTRAR: Jan 7 2002.

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named at item 1; and that this record was established and filed in my office in accordance with the provisions of the Illinois Vital Records Act.

DATE: JANUARY 7, 2002 SIGNED: Jay W. Torrey LOCAL REGISTRAR AT: EVANSTON, Illinois OFFICIAL TITLE

The original record of this death is permanently filed with the ILLINOIS DEPARTMENT OF PUBLIC HEALTH at Springfield. County clerks and local registrars are authorized to make certifications from copies of the original record. The Illinois statutes provide that the certification of a death record by the Department of Public Health, local registrar or county clerk shall be prima facie evidence in all courts and places of the facts therein stated.