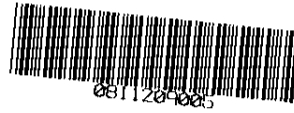


# UNOFFICIAL COPY



Doc#: 0811209005 Fee: \$40.00  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 04/21/2008 08:37 AM Pg: 1 of 3

**PREPARED BY, AND  
WHEN RECORDED RETURN TO:**  
Service Link  
4000 Industrial Blvd.  
Aliquippa, PA 15001  
1-800-439-5451

## AFFIDAVIT OF DEATH

Commonwealth of Illinois  
County of Cook

Viroje Sithithum of legal age, being first duly sworn deposes and states that Dianna M. Sithithum the decedent mentioned in the attached copy of Certificate of Death, is the same person as Dianna M. Sithithum named as one of the parties in the certain deed dated 04/23/1993 executed by Viroje Sithithum and Dianna M. Sithithum to Viroje Sithithum, recorded on 04/26/1993, in the records of Cook County, IL, covering the following described real property situated in Cook County, State of Illinois.

*See Attached Legal Description attached hereto and made a part hereof.*

That the deceased died 11/5/2004, as evidenced by a certified copy of the certificate of the deceased attached hereto.

That the deceased died (you make a choice):

Leaving no Last Will & Testament

Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven will be filed with the Clerk of Probate Division of the Circuit Court of \_\_\_\_\_ County, Illinois.

Leaving a Last Will & Testament which was filed in Unproven Will Box of the Probate Division of the Circuit Court of \_\_\_\_\_ County, Illinois, on \_\_\_\_\_, 20\_\_\_\_

DATED this 30 day of October, 2007

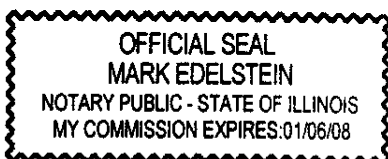
*Viroje Sithithum*

Viroje Sithithum

SUBSCRIBED AND SWORN to before me this 6th day of November, 2007.

WITNESS my hand and official seal *Mark Edelstein*

NOTARY PUBLIC  
MARK EDELSTEIN  
PRINTED NAME OF NOTARY  
My Commission Expires: 1-6-08



3

# UNOFFICIAL COPY

## Exhibit "A" Legal Description

All that certain parcel of land situated in the County of Cook, State of Illinois, being known and designated as Lot 28 in Block 1 in Wm. E. Hattermans Irving Park Boulevard subdivision in the NW 1/4 of the NW 1/4 of Section 24, Township 40 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois.

Tax ID: 13-27-100-033-0000  
13-24-100-032-0000

Property of Cook County Clerk's Office

REGISTRATION DISTRICT NO. 6.10

STATE OF ILLINOIS

STATE FILE NUMBER

# MEDICAL CERTIFICATE OF DEATH

615617

1. COUNTY OF DEATH **DIANNA** M. SITHITHIUM LAST **SEX** **2. FEMALE** DATE OF DEATH (MONTH, DAY, YEAR) **3. NOVEMBER 5, 2004**

4. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER **CHICAGO** AGE - LAST BIRTHDAY (YRS) **58** UNDER 1 YEAR MOS. **12** UNDER 1 DAY HOURS **12** DATE OF BIRTH (MONTH, DAY, YEAR) **5. FEBRUARY 1, 1946**

6a. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) **CHICAGO** 6b. SWEDISH COVENANT HOSPITAL 6c. **INPATIENT**

7. DUIDITH, MINN. 8a. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) **8a. MARRIED** 8b. NAME OF SURVIVING SPOUSE (MARRIAGE NAME, IF WIFE) **ROGER SITHITHIUM** 8c. WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO) **NO**

10. SOCIAL SECURITY NUMBER **331-38-7849** 11a. USUAL OCCUPATION **BINDER** 11b. KIND OF BUSINESS OR INDUSTRY **PRINTING COMPANY** 11c. EDUCATION (SPECIFY HIGHEST GRADE COMPLETED) **12** 12. CITY, TOWN, TWP. OR ROAD DISTRICT NO. **CHICAGO** 13a. RESIDENCE (STREET AND NUMBER) **3900 N. TROY STREET** 13b. CITY, TOWN, TWP. OR ROAD DISTRICT NO. **CHICAGO** 13c. INSIDE CITY (YES/NO) **YES** 13d. COUNTY **COOK**

13a. STATE **ILLINOIS** 13b. ZIP CODE **60618** 14a. RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY) **WHITE** 14b.  YES  NO SPECIFY: **OF HISPANIC ORIGIN? (SPECIFY NO OR YES. IF YES, SPECIFY CUBAN, MEXICAN, ETC.)**

15. FATHER-NAME **PAUL** 16. MOTHER-NAME **VIOLET** 17a. RECORDS **17a.5145 N. CALIFORNIA, CHGO., IL 60625** 17b. MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY, OR TOWN, STATE, ZIP)

18. DECEASED'S NAME (TYPE OR PRINT) **CONCEPCION ARQUIZA** 19. RELATIONSHIP **MEDICAL** 20. DATE OF DEATH (MONTH, DAY, YEAR) **NOVEMBER 5, 2004**

21. IMMEDIATE CAUSE (Final disease or condition resulting in death) **MASSIVE (R) SIDE STROKE WITH HEMIPARISIS**

22. CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) **CHF** (b) **CHF** (c) **Factor of sudden defaecancy**

23. PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.

24. CLASS OF OPERATION, IF ANY **200.** MAJOR FINDINGS OF OPERATION

25. DID NOT ATTEND THE DECEASED (MONTH, DAY, YEAR) **11-04-04** 26. WAS CONSUMER OF MEDICAL EXAMINER NOTIFIED? (YES/NO) **NO** 27. HOUR OF DEATH **11:45 A.M.**

28. SIGNATURE **John Wilhelm, M.D.** 29. NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) **ERMIAS DJILAHUN, M.D.** 30. DATE SIGNED (MONTH, DAY, YEAR) **11-08-04**

31. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT) **ERMIAS DJILAHUN, M.D.** 32. ILLINOIS LICENSE NUMBER **036-094888**

33. BURIAL, CREMATION, REMOVAL, (SPECIFY) **24b. ACACIA PARK CEMETERY** 34. CEMETERY OR CREMATORY NAME **NORWOOD PARK TWPSP., ILLINOIS** 35. LOCATION **CHICAGO** 36. CITY OR TOWN **CHICAGO** 37. STATE **ILLINOIS** 38. DATE (MONTH, DAY, YEAR) **NOV. 09, 2004**

39. FUNERAL HOME **MAITZ FUNERAL HOME** 40. STREET AND NUMBER OR R.F.D. **3440 N. CENTRAL AVE.** 41. CITY OR TOWN **CHICAGO** 42. STATE **ILLINOIS** 43. ZIP **60634**

44. LOCAL REGISTRAR'S SIGNATURE **John Wilhelm, M.D.** 45. RAYMOND P. RZACA 46. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) **NOV 09 2004**

STATE OF ILLINOIS  
COUNTY OF COOK  
CITY OF CHICAGO  
NOV 09 2004

JOHN L. WILHELM M.D., LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS FOR THE CITY OF CHICAGO BY VIRTUE OF THE LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO; THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY OF A RECORD KEPT BY ME IN ORDINANCE OF SAID LAW AND ORDINANCES.

*John Wilhelm, M.D.*  
LOCAL REGISTRAR

CITY OF CHICAGO  
DEPARTMENT OF PUBLIC HEALTH

THIS CERTIFICATE COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.