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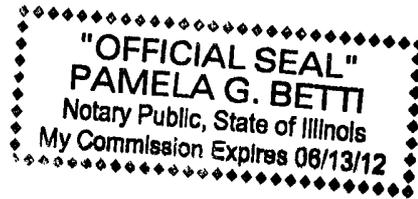
B. CHARLOTTE NAMETZ, of legal age and under no legal disability and who survived David P. Filter.

C. ERNEST FILTER, of legal age and under no legal disability and who survived David P. Filter.

Ernest Filter
ERNEST FILTER

Subscribed and Sworn to before me this 29th day of September A.D. 2009.

Pamela G. Betti
Notary Public



Affidavit prepared by and return to:
MICHAEL J. CORNFIELD
6153 N. Milwaukee Ave.
Chicago, IL 60646

Property of Cook County Clerk's Office

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CERTIFICATE OF DEATH RECORD

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2009 0055331		DATE ISSUED 08/06/2009	
DECEDENT'S LEGAL NAME DAVID PAUL FILTER		SEX MALE	DATE OF DEATH AUGUST 02, 2009
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 77 YEARS	DATE OF BIRTH JUNE 19, 1932	
CITY OR TOWN NILES		HOSPITAL OR OTHER INSTITUTION NAME REGENCY HLTHCARE & REHAB CTRE	
PLACE OF DEATH NURSING HOME / LONG TERM CARE FACILITY			
BIRTHPLACE BLOOMFIELD, NE	SOCIAL SECURITY NUMBER	MARITAL STATUS AT TIME OF DEATH NEVER MARRIED	SURVIVING SPOUSE'S NAME
RESIDENCE 6300 N INDIAN ROAD		APT. NO.	CITY OR TOWN CHICAGO
COUNTY COOK	STATE IL	ZIP CODE 60646	FATHER'S NAME AUGUST C E FILTER
INFORMANT'S NAME ERNEST C FILTER		RELATIONSHIP BROTHER	MOTHER'S NAME PRIOR TO FIRST MARRIAGE ESTHER ANNA MARIE BECKER
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION CREMATION SERVICES INC	LOCATION - CITY OR TOWN AND STATE SCHILLER PARK, IL
FUNERAL HOME KOLBUS-JOHN V. MAY FUNERAL HOME, 6847 WEST HIGGINS AVENUE, CHICAGO, IL, 60656		DATE OF DISPOSITION AUGUST 04, 2009	
FUNERAL DIRECTOR'S NAME MICHAEL J ROMINSKI		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015655	
LOCAL REGISTRAR'S NAME DAVID ORR		DATE FILED WITH LOCAL REGISTRAR AUGUST 4, 2009	
CAUSE OF DEATH PART I. SPINAL CA WITH METASTASES			
IMMEDIATE CAUSE (Final disease or condition resulting in death)		YEARS	
a. _____		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
Due to (or as a consequence of):			
b. _____			
Due to (or as a consequence of):			
c. _____			
Due to (or as a consequence of):			
PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I. DEMENTIA; METS TO BONE		WAS AN AUTOPSY PERFORMED? NO	
		WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
DID TOBACCO USE CONTRIBUTE TO DEATH? UNKNOWN	FEMALE PREGNANCY STATUS NOT APPLICABLE	MANNER OF DEATH NATURAL	
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?
LOCATION OF INJURY			
DESCRIBE HOW INJURY OCCURRED:			IF TRANSPORTATION INJURY, SPECIFY:
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE AUGUST 01, 2009	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED
		TIME OF DEATH 02:25 AM	
CERTIFIER PHYSICIAN		DATE CERTIFIED AUGUST 03, 2009	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH ITALO D. PIERI, 7447 W Talcott, Chicago, Illinois, 60631		PHYSICIAN'S LICENSE NUMBER 036-058671	



This is to certify that this is a true and correct copy from the official death record filed with Illinois Department of Health.

David Orr
David Orr
Cook County Clerk

