



# UNOFFICIAL COPY

CORNER OF THE WEST 1/2 OF THE NORTH WEST 1/4 OF SAID SECTION 15; THENCE SOUTH 0 DEGREES 13 MINUTES 35 SECONDS WEST, ALONG THE EAST LINE OF THE WEST 1/2 OF THE WEST 1/2 OF SAID SECTION 15, 1212.53 FEET; THENCE NORTH 89 DEGREES 15 MINUTES 34 SECONDS WEST 736.98 FEET; THENCE SOUTH 0 DEGREES 42 MINUTES 44 SECONDS WEST 299.93 FEET; THENCE NORTH 76 DEGREES 53 MINUTES 45 SECONDS WEST 16.63 FEET FOR THE POINT OF BEGINNING OF SAID CENTER LINE; THENCE SOUTH 26 DEGREES 16 MINUTES 50 SECONDS EAST 5.21 FEET; THENCE SOUTH 31 DEGREES 17 MINUTES 20 SECONDS EAST 254.34 FEET; THENCE SOUTHEASTERLY ALONG A CURVE TO THE LEFT HAVING A RADIUS OF 76.73 FEET, A DISTANCE OF 77.68 FEET; THENCE SOUTH 89 DEGREES 17 MINUTES 20 SECONDS EAST 15.76 FEET; THENCE SOUTHEASTERLY ALONG A CURVE TO THE RIGHT HAVING A RADIUS OF 71.79 FEET, A DISTANCE OF 85.68 FEET; THENCE SOUTH 20 DEGREES 54 MINUTES 20 SECONDS EAST 51.15 FEET; THENCE SOUTHEASTERLY ALONG A CURVE TO THE LEFT HAVING A RADIUS OF 123.18 FEET, A DISTANCE OF 114.08 FEET; THENCE SOUTH 73 DEGREES 58 MINUTES 10 SECONDS EAST 155.10 FEET TO THE NORTHERLY RIGHT OF WAY LINE OF ELGIN, JOLIET AND EASTERN RAILROAD COMPANY FOR THE TERMINUS OF SAID LINE IN COOK COUNTY, ILLINOIS, FOR INGRESS AND EGRESS AS CREATED BY DEED FROM ATHALIE C. LITTELL AND WILLIS H. LITTELL, HER HUSBAND, TO JOHN D. WALBAUM AND STEPHANIE C. WALBAUM, HIS WIFE, DATED JUNE 8, 1972, AND RECORDED AUGUST 15, 1972, AS DOCUMENT NUMBER 22012571, IN COOK COUNTY, ILLINOIS.

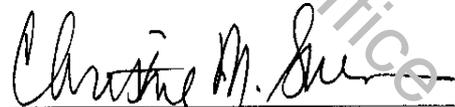
Address of Property: 102 Brinker Road, Barrington Hills, Illinois 60010

Permanent Index Number: 01-15-100-014-0000

That the deceased died on July 24, 2009, as evidenced by a certified copy of the death certificate of the deceased attached hereto.

  
 \_\_\_\_\_  
 JOHN S. KEATING, JR.

Subscribed and sworn to before me by the said JOHN S. KEATING, JR. as affiant this  
14<sup>th</sup> day of December, 2009.

  
 \_\_\_\_\_  
 Notary Public

# UNOFFICIAL COPY

## CERTIFICATION OF DEATH RECORD

### CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2009 0053503

DATE ISSUED 08/06/2009

DECEDENT'S LEGAL NAME <b>SUZANNE BANKS KEATING</b>		SEX <b>FEMALE</b>	DATE OF DEATH <b>JULY 24, 2009</b>	
COUNTY OF DEATH <b>COOK</b>	AGE AT LAST BIRTHDAY <b>68 YEARS</b>	DATE OF BIRTH <b>OCTOBER 24, 1940</b>		
CITY OR TOWN <b>BARRINGTON HILLS</b>		HOSPITAL OR OTHER INSTITUTION NAME <b>102 BRINKER RD</b>		
PLACE OF DEATH <b>DECEDENT'S HOME</b>				
BIRTHPLACE <b>PORTLAND, OR</b>	SOCIAL SECURITY NUMBER	MARITAL STATUS AT TIME OF DEATH <b>MARRIED</b>	SURVIVING SPOUSE'S NAME <b>JOHN S KEATING JR</b>	EVER IN U.S. ARMED FORCES? <b>NO</b>
RESIDENCE <b>102 BRINKER RD</b>	APT. NO.	CITY OR TOWN <b>BARRINGTON HILLS</b>		INSIDE CITY LIMITS? <b>YES</b>
COUNTY <b>COOK</b>	STATE <b>IL</b>	ZIP CODE <b>60010</b>	FATHER'S NAME <b>RODNEY BANKS</b>	MOTHER'S NAME PRIOR TO FIRST MARRIAGE <b>CATHERINE M MILLER</b>
INFORMANT'S NAME <b>JOHN S KEATING JR</b>		RELATIONSHIP <b>HUSBAND</b>	MAILING ADDRESS <b>102 BRINKER RD, BARRINGTON HILLS, IL, 60010</b>	
METHOD OF DISPOSITION <b>BURIAL</b>	PLACE OF DISPOSITION <b>EVERGREEN CEMETERY ASSOCIATION</b>	LOCATION - CITY OR TOWN AND STATE <b>BARRINGTON, IL</b>	DATE OF DISPOSITION <b>JULY 27, 2009</b>	
FUNERAL HOME <b>DAVENPORT FAMILY FUNERAL HOME &amp; CREMATORY, 149 W. MAIN STREET, BARRINGTON, IL, 60010</b>				
FUNERAL DIRECTOR'S NAME <b>MATHEW OLEJNICZAK</b>			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER <b>034016021</b>	
LOCAL REGISTRAR'S NAME <b>DAVID ORR</b>			DATE FILED WITH LOCAL REGISTRAR <b>JULY 25, 2009</b>	
CAUSE OF DEATH PART I. <b>LUNG CANCER</b>		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH		<b>4 YEARS</b>
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a. _____ 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 <b>significant conditions contributing to death</b> but not resulting in the underlying cause given in PART I.			WAS AN AUTOPSY PERFORMED? <b>NO</b>	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? <b>N/A</b>	
DID TOBACCO USE CONTRIBUTE TO DEATH? <b>YES</b>	FEMALE PREGNANCY STATUS <b>NOT PREGNANT WITHIN LAST YEAR</b>		MANNER OF DEATH <b>NATURAL</b>	
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? <b>YES</b>	DATE LAST SEEN ALIVE <b>JULY 23, 2009</b>	WAS MEDICAL EXAMINER OR CORONER CONTACTED? <b>YES</b>	DATE PRONOUNCED	TIME OF DEATH <b>08:00 AM</b>
CERTIFIER <b>PHYSICIAN</b>			DATE CERTIFIED <b>JULY 24, 2009</b>	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH <b>BONOMI, PHILIP, 610 S MAPLE AVE, OAK PARK, ILLINOIS, 60304</b>			PHYSICIAN'S LICENSE NUMBER <b>036052056</b>	

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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE