



# UNOFFICIAL COPY

## Exhibit "A" Legal Description

The premises commonly known as 15317 Las Robles Street, Oak Forest, Illinois 60452.

Permanent Index Number (PIN): 28-17-115-032-0000

Lot 19 in Block 18 in the 6<sup>th</sup> Addition to Medema's El Vista Gardens, Being a Subdivision of Part of the Northwest  $\frac{1}{4}$  of Section 17, Township 36 North, Range 13 East of the Third Principal Meridian, in the Village of Oak Forest, in Cook County, Illinois.

Cook County Clerk's Office

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BREMEN TOWNSHIP REGISTRAR  
TINLEY PARK, ILLINOIS  
MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2009 0080991

DATE ISSUED 11/09/2009

DECEDENT'S LEGAL NAME BOBBIE ANN BRUNETTE		SEX FEMALE	DATE OF DEATH NOVEMBER 06, 2009	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 56 YEARS	DATE OF BIRTH JULY 20, 1953		
CITY OR TOWN OAK FOREST		HOSPITAL OR OTHER INSTITUTION NAME 15317 LAS ROBLES STREET		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED] 9239	MARITAL STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE'S NAME ROBERT W BRUNETTE	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 15317 LAS ROBLES STREET		APT. NO.	CITY OR TOWN OAK FOREST	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60452	FATHER'S NAME SAMUEL CAMPAGNA	MOTHER'S NAME PRIOR TO FIRST MARRIAGE LORRAINE HLAD
INFORMANT'S NAME ROBERT W BRUNETTE		RELATIONSHIP HUSBAND	MAILING ADDRESS 15317 LAS ROBLES STREET, OAK FOREST, IL, 60452	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION SAINT MARY CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE EVERGREEN PARK, IL	DATE OF DISPOSITION NOVEMBER 11, 2009	
FUNERAL HOME BRADY GILL FUNERAL HOME TINLEY PARK 16600 S. OAK PARK AVE, TINLEY PARK, IL, 60477				
FUNERAL DIRECTOR'S NAME MICHAEL F GILL			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011540	
LOCAL REGISTRAR'S NAME LEONARD J HINES			DATE FILED WITH LOCAL REGISTRAR NOVEMBER 9, 2009	
CAUSE OF DEATH PART I LUNG CANCER				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a. [REDACTED]		
		b. [REDACTED]		
		c. [REDACTED]		
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:			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 PREGNANT WITHIN LAST YEAR		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? NO	DATE LAST SEEN ALIVE UNKNOWN	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 10:59 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED NOVEMBER 09, 2009	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH SYED Z MOHSIN, 2850 W 95TH STREET, EVERGREEN PARK, ILLINOIS, 60805			PHYSICIAN'S LICENSE NUMBER 036098660	

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

*Leonard J. Hines*  
Leonard J. Hines  
Bremen Township Registrar

