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ATTORNEYS' TITLE GUARANTY FUND, INC.

LEGAL DESCRIPTION

Legal Description:

Lot 1 in Block 3 in Thomas A. Catino's First Addition to Arlington Heights Unit Number Two (2) being a Subdivision of part of the Southwest 1/4 of Section 31, Township 42 North, Range 11, East of the Third Principal Meridian, according to Plat thereof registered in the Office of the Registrar of Titles of Cook County, Illinois, on May 8, 1964, as Document Number 2148885.

Permanent Index Number:

Property ID: 03-31-306-001-0000

Property Address:

1117 West Francis Drive
Arlington Heights, IL 60005

Property of Cook County Clerk's Office

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**COOK COUNTY CLERK VITAL RECORDS
CHICAGO, ILLINOIS
MEDICAL CERTIFICATE OF DEATH**

STATE FILE NUMBER 2011 0050218

DATE ISSUED 07-07-2011

DECEDENT'S LEGAL NAME WILLIAM J COLE		SEX MALE		DATE OF DEATH JULY 01, 2011	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 88 YEARS		DATE OF BIRTH APR 17, 1923	
CITY OR TOWN ARLINGTON HEIGHTS		HOSPITAL OR OTHER INSTITUTION NAME MOORINGS HEALTH CENTER			
PLACE OF DEATH NURSING HOME / LONG TERM CARE FACILITY					
BIRTHPLACE BALDWINSVILLE, NY		SOCIAL SECURITY NUMBER 067-18-5864		MARRIAGE RECORDS NAME MARY E. KNIGHT	
RESIDENCE 1117 FRANCIS DRIVE		APT. NO.		CITY OR TOWN ARLINGTON HEIGHTS	
COUNTY COOK		STATE IL		ZIP CODE 60005	
INFORMANT'S NAME MARY E COLE		RELATIONSHIP WIFE		MOTHER'S NAME PRIOR TO FIRST MARRIAGE ESTHER PERKINS	
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION ALL SAINTS CATHOLIC CEMETERY		DATE OF DISPOSITION JULY 07, 2011	
FUNERAL HOME LAUTERBURG & OEHLER FUNERAL HOME, 2000 EAST NORTHWEST HIGHWAY, ARLINGTON HEIGHTS, IL 60004					
FUNERAL DIRECTOR'S NAME RONALD C ROTH		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014517			
LOCAL REGISTRAR'S NAME DAVID ORR		DATE FILED WITH LOCAL REGISTRAR JULY 7, 2011			
CAUSE OF DEATH					
PART I. ASPIRATION PNEUMONIA					
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 <i>significant conditions contributing to death</i> 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					
MANNER OF DEATH NATURAL					
DID TOBACCO USE CONTRIBUTE TO DEATH?		FEMALE PREGNANCY STATUS NOT APPLICABLE		INJURY AT WORK?	
DATE OF INJURY		TIME OF INJURY		PLACE OF INJURY	
LOCATION OF INJURY					
DESCRIBE HOW INJURY OCCURRED:					
IF TRANSPORTATION INJURY, SPECIFY					
ATTEND THE DECEASED? YES		DATE LAST SEEN ALIVE JUNE 29, 2011		WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	
CERTIFIER PHYSICIAN		DATE CERTIFIED JULY 02, 2011		TIME OF DEATH 07:35 AM	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH ANDREW KROCK, 1700 WEST CENTRAL ROAD, ARLINGTON HEIGHTS, ILLINOIS 60005				PHYSICIAN'S LICENSE NUMBER 036 079839	

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.

David Orr
David Orr
Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

THE WORD VOID APPEARS WHEN PHOTOCOPIED