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Chicago, IL 60617
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Doc#: 1401415035 Fee: \$62.25
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Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 01/14/2014 11:15 AM Pg: 1 of 2

RECORDING REQUESTED
BY/RETURN TO:

Prepared By:
Mary Lue Lanier
11647 S. Campbell Ave
Chicago, IL 60655

58512575-2355828 (1)

AFFIDAVIT OF DEATH OF JOINT TENANT

Title Order No. 58512575
Loan No. 3321483820

I, Mary Lue Lanier of legal age, being first duly sworn, depose and say:

That Reginald M. Lanier, the decedent mentioned, is the same person as, Reginald M. Lanier, named as one of the parties in that certain Joint Tenancy Deed from Rodney Gansho, as Independent Administrator of the Estate of Evelyn Pitula, deceased to Reginald M. Lanier and Mary Lue Lanier, not in tenancy in common, but in joint tenancy, Dated November 14, 2001, Recorded February 27, 2002 in Instrument/Case No. 0020230497.

Said deed conveying real property described as follows:

Tax Id Number(s): 24-24-409-014.

Land Situated in the County of Cook in the State of IL
LOT 21 IN BLOCK 6 IN HAROLD J. MCELHINNY'S FIRST ADDITION TO
SOUTHTOWN, A SUBDIVISION OF
THE SOUTH EAST QUARTER OF SECTION 24, TOWNSHIP 37 NORTH, RANGE 13,
EAST OF THE THIRD
PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.
Commonly known as: 11647 South Campbell Avenue, Chicago, IL 60655

S
D
12/27/2013
Mary Lue Lanier

Dated: 12-6-2013

Mary Lue Lanier
Mary Lue Lanier

STATE OF Illinois)
COUNTY OF Cook) S.S.)



1632 12/27/2013 79198728/1

Mary Lue Lanier, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

[Handwritten signature]
This area for official notarial seal

"OFFICIAL SEAL"
Jonathan M. Vogel
Notary Public, State of Illinois
Cook County
My Commission Expires Jan. 20, 2014

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

STATE FILE NUMBER 2011 0085340

MEDICAL EXAMINER'S CASE NUMBER 185 NOV 11

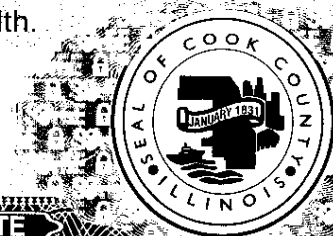
DATE ISSUED 11/18/2011

DECEDENT'S LEGAL NAME REGINALD MICHEAL LANIER		SEX MALE	DATE OF DEATH NOVEMBER 10, 2011	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 54 YEARS	DATE OF BIRTH JUNE 17, 1957		
CITY OR TOWN CHICAGO	HOSPITAL OR OTHER INSTITUTION NAME 9017 S HALSTED			
PLACE OF DEATH GROCERY STORE				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME MARY LUE BANKS	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 11647 S CAMPBELL	APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60655	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION CLARENCE DAVIS	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION DORIS TURNER
INFORMANT'S NAME MARY LUE LANIER	RELATIONSHIP WIFE	MAILING ADDRESS 8147 S CHAMPLAIN AVE, CHICAGO, IL, 60619		
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION WASHINGTON MEMORY GARDENS	LOCATION - CITY OR TOWN AND STATE HOMWOOD, IL	DATE OF DISPOSITION NOVEMBER 19, 2011	
FUNERAL HOME LEAK AND SONS, 7838 SOUTH COTTAGE GROVE, CHICAGO, IL, 60619				
FUNERAL DIRECTOR'S NAME SPENCER LEAK SR		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 031007489		
LOCAL REGISTRAR'S NAME DAVID ORR		DATE FILED WITH LOCAL REGISTRAR NOVEMBER 17, 2011		
CAUSE OF DEATH PART I. MULTIPLE GUNSHOT WOUNDS				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.	UNKNOWN UNKNOWN	
		b.	Due to (or as a consequence of):	
		c.	Due to (or as a consequence of):	
		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? YES	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? YES	
FEMALE PREGNANCY STATUS NOT APPLICABLE			MANNER OF DEATH HOMICIDE	
DATE OF INJURY NOVEMBER 10, 2011	TIME OF INJURY 7:21 PM	PLACE OF INJURY GROCERY STORE	INJURY AT WORK? YES	
LOCATION OF INJURY 9017 SOUTH HALSTED, CHICAGO, IL, 60620				
DESCRIBE HOW INJURY OCCURRED SHOT MULTIPLE TIMES.			IF TRANSPORTATION INJURY, SPECIFY.	
ATTEND THE DECEASED?	DATE LAST SEEN ALIVE	WAS MEDICAL EXAMINER OR CORONER CONTACTED?	DATE PRONOUNCED NOVEMBER 10, 2011	TIME OF DEATH 11:30 PM
CERTIFIER MEDICAL EXAMINER/CORONER			DATE CERTIFIED NOVEMBER 16, 2011	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH NANCY L. JONES MD, 2121 W. HARRISON ST, CHICAGO, IL, 60612			PHYSICIAN'S LICENSE NUMBER	

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