1504915002

Doc#: 1504915002 Fee: $66.25
RHSP Fee:$9.00 RPRF Fee: $1.00
Karen A.Yarbrough
Cook County Recorder of Deeds
Date: 02/18/2015 08:29 AM Pg: 1 of 3

Prepared By:
~~RECORDING REQUESTED BY/ RETURN TO:~~
Title Source, Barb Smith
First National Building | 13th Floor, East
662 Woodward Avenue | Detroit, MI 48226

Return To:
Indecomm Global Services
1260 Energy Lane
St. Paul, MN 55108

Record 1st
79741634

for Recorder's Use Only

AFFIDAVIT OF DEATH OF JOINT TENANT

Title Order No. 59761435 - 2826221
Loan No. 3335543444

I, Thomas O'Malley, Jr., of legal age, being first duly sworn, deposed and say:

Magda T. O'Malley, the decedent mentioned , is the same person as, Magda T. O'Malley, named as one of the parties in that certain Warranty Deed from Daniel Castro and Nancy Castro, his wife to Thomas O'Malley, Jr. and Magda T. O'Malley, his wife, not in tenancy in common, but in joint tenancy, Dated April 29, 1993, Recorded May 4, 1993 in Instrument/Case No. 93332755.of the Cook County Records.

Said deed conveying real property described as follows:

Tax Id Number(s): 13273080230000

Land Situated in the County of Cook in the State of IL

THE EAST 24 FEET OF LOT 13 AND THE WEST 6 FEET OF LOT 14 IN UBER'S RESUBDIVISION OF BLOCK 12
IN S. S. HAYES' KELVYN GROVE ADDITION TO CHICAGO, A SUBDIVISION OF THE SOUTHWEST 1/4 OF
SECTION 27, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK
COUNTY, ILLINOIS.

Commonly known as: 4738 West Wrightwood Avenue , Chicago, IL 60639

Dated: 1-26-15

Thomas O'Malley, Jr.

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

Thomas O'Malley, Jr., proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me. Jacquelyn J Conard

(This area for official notarial seal)

OFFICIAL SEAL
JACQUELYN J CONARD
Notary Public - State of Illinois
My Commission Expires Sep 13, 2017

U05136597
1632 2/4/2015 79741634/1

CERTIFICATION OF DEATH RECORD

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

STATE FILE NUMBER 2014 0009483 **DATE ISSUED** 2/6/2014

DECEDENT'S LEGAL NAME: MAGDA T O'MALLEY		SEX: FEMALE	DATE OF DEATH: FEBRUARY 03, 2014
COUNTY OF DEATH: COOK	AGE AT LAST BIRTHDAY: 55 YEARS	DATE OF BIRTH: SEPTEMBER 01, 1958	
CITY OR TOWN: PARK RIDGE	HOSPITAL OR OTHER INSTITUTION NAME: ADVOCATE LUTHERAN GENERAL HOSPITAL		
PLACE OF DEATH: INPATIENT			
BIRTHPLACE: PR	SOCIAL SECURITY NUMBER: [redacted]	STATUS AT TIME OF DEATH: MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME: THOMAS O'MALLEY
EVER IN U.S. ARMED FORCES? NO			
RESIDENCE: 4738 W WRIGHTWOOD AVE	APT. NO.	CITY OR TOWN: CHICAGO	INSIDE CITY LIMITS? YES
COUNTY: COOK	STATE: IL	ZIP CODE: 60639	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION: NATALIO SANCHEZ
MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION: MARIA TORRES			
INFORMANT'S NAME: THOMAS O'MALLEY	RELATIONSHIP: HUSBAND	MAILING ADDRESS: 4738 W WRIGHTWOOD AVE, CHICAGO, IL, 60639	
METHOD OF DISPOSITION: CREMATION	PLACE OF DISPOSITION: FOREST CREMATORY	LOCATION - CITY OR TOWN AND STATE: ROMEOVILLE, IL	DATE OF DISPOSITION: FEBRUARY 06, 2014
FUNERAL HOME: OLSON BURKE/SULLIVAN FUNERAL & CREMATION CENTER, 6467 NORTHWEST HIGHWAY, CHICAGO, IL, 60631			
FUNERAL DIRECTOR'S NAME: MARY ELIZABETH SULLIVAN		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER: 034016111	
LOCAL REGISTRAR'S NAME: DAVID ORR		DATE FILED WITH LOCAL REGISTRAR: FEBRUARY 5, 2014	

CAUSE OF DEATH PART I.

IMMEDIATE CAUSE (Final disease or condition resulting in death)

a. PNEUMONIA — Due to (or as a consequence of):

b. ANOREXIA — Due to (or as a consequence of):

c. — Due to (or as a consequence of):

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

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

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? YES	DATE LAST SEEN ALIVE: FEBRUARY 03, 2014	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH: 10:15 PM
CERTIFIER: PHYSICIAN			DATE CERTIFIED: FEBRUARY 05, 2014
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH: LEXY WISTENBERG, 6131 W DEMPSTER ST, MORTON GROVE, ILLINOIS, 60053			PHYSICIAN'S LICENSE NUMBER: 036082382

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

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM