UNOFFICIAL CC

Abigail Acero, hereinafter referred to as the affiant, states under oath that the affiant is the daughter of Jose C. Rodriquez Jr. and has personal knowledge of the facts set forth herein and resides at 1924 South 57th Court in the Town of Cicero, IL; that the affiant was acquainted with Jose C. Rodriguez Jr., the decedent who resided at 5218 West 22nd Place, in the Town of Cicero, IL; that at the time of death, the decedent was one of the owners of the property commonly known as 5218 West 22nd Place, Cicero, IL 60804, by virtue of properly recorded joint tenancy warranty deed, said property located in Cook County,

SEE ATTACHED.

Permanent Index Number: 16-28-103-024-0000

That the decedent had no interest in any business or partnership, nor held any power of appointment at death, nor created any remainder interests in property by transfer with retention of a life interest therein or the creation of interests to take effect

That the decedent died on 1/2, 2015, leaving no last will and testament;

That the total value of decedent's estate, including the taxable interest in the above property was below \$200,000.00; and

That the value of the above property individually was \$200,000.00.

That the affiant makes this affidavit to induce the Cook County Recorder of Deed to place the Title interest of Jose C. Rodriquez Jr. of the property to the surviving join tenant, Guadalupe Rodriquez.

Abigail Acero (Seal)	Subscribed and Sworn to before me this Krh, day
(Seal)	June 15th : 3015
"OFFICIAL SEAI Lisa Ann Palmie Notary Public, State of II My Commission Expires 6.	Pri Notary Public

Note: If the decedent left a will, it will be necessary that the original or a certified copy thereof be presented to us for inspect A death certificate, together with evidence of payment of death taxes, if any, should accompany this affidavit.

This instrument was prepared by:

Gene A Eich 6032 North Lincoln Avenue Morton Grove, IL 60053

Mail to:

Gene A Eich 6032 North Lincoln Avenue Morton Grove, IL 60053

Doc#: 1517445023 Fee: \$64.00

RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 06/23/2015 09:18 AM Pg: 1 of 3

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UNGETELCHALFEGOPY

Page 2

PROPERTY ADDRESS: 5218 West 22nd Place, Cicero, IL 60804

LEGAL DESCRIPTION:

LOT 6 IN THE SUBDIVISION OF LOTS 32 TO 42 IN BLOCK 1 AND LOTS 9 TO 21 IN BLOCK 2 OF HAWTHORNE LAND AND IMPROVEMENT COMPANY ADDITION TO MORTON PARK A SUBDIVISION OF THE EAST ½ OF THE NORTHWEST ¼ OF SECTION 28, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

MBER(S): .

OP COOK COUNTY CLORES OFFICE PERMANENT INDEX NUMBER(S): 16-28-103-024-0000

1517445023 Page: 3 of 3

CERTIFICATION DE DEATH ASSORD

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

TATE FILE NUMBER 2015	0041522								DATE	ISSUED 6/1/2	
DECEDENT'S LEGAL NAME JOSE C RODRIGUEZ	JR						SEX MALE		OF DEATH Y 12, 201	15	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY DATE OF B 81 YEARS OCTO					IRTH BER 08, 193	3			
OTTY OR TOWN MELROSE PARK						ER INSTITUTION DSPICE AT W		OSPITA	۱L		
PLACE OF DEATH HOSPICE FACILITY										·	
IRTHPLACE MEXICO	SOCIAL SECURI 339-46-0	1					IG SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME DALUPE GARCIA			EVER IN U.S. ARMED	
RESIDENCE 5218 WEST 22ND PL			APT.	NO.		Y OR TOWN				INSIDE CITY LIMITS?	
	ZIP CODE 60804		O-PARENT'S NAME F C RODRIGUE				MOTHER/CO-PAR			RST MARRIAGE/CIVIL UNIO	
NFORMANT'S NAME ABIGAIL ACERO	100	RELATIONSHIP MAILING ADDRESS DAUGHTER 5218 WEST 22ND PL, CIC						CICERO,	CERO, IL, 60804		
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION FEIGHTS CREMATORY								DATE OF DISPOSITION MAY 26, 2015	
UNERAL HOME PLANET GREEN CREM	MATIONS, 230 E	11TH ST	CHICAGO F	HEIGHTS, IL	., 604	11				:	
UNERAL DIRECTOR'S NAME BRETT R MORELAND	FUNERAL DIRECTOR'S NAME						FUNERAL DIR 03401458	ECTOR'S ILLINOIS LICENSE NUMBER 38			
LOCAL REGISTRAR'S NAME MARYANN PAOLANTONIO DATE FILED W MAY 26, 2								TH LOCAL REGISTRAR 1015			
CAUSE OF DEATH PAR IMMEDIATE CAUSE	TI. COLON CAN	CER	7						VEEN ATH		
(Final disease or condition resulting in death)	b.		Due to ((or as a consequen	ce of):			ROXIMA	ALBETA	· .	
			Due to ((or as a consequen	ce /i):	.,		APP	ONSET	<u>. :</u>	
	C.					2					
PART II. Enter other significant of	conditions contribution	a to death		or as a consequent		iven in Part	l w		LOBEN BED	FORMED? NO	
• • • • • • • • • • • • • • • • • • •						. (w	ERE AUTO	PSY FINDI	NGS USED TO DEATH? N/A	
EMALE PREGNANCY STATUS								ANNER OF	DEATH	DEATH: N/A	
TE OF INJURY		TIME OF IN	NJURY	PLACE OF IN	PLACE OF INJURY			0,		INJURY AT WORK?	
OCATION OF INJURY		L	. H Hada waaw								
ESCRIBE HOW INJURY OCCU	RRED:	· · · · · · · · · · · · · · · · · · ·						IFT	RANF ('OF)T	ATION INJURY, SPECIF	
TTEND THE DECEASED?	DATE LAST SEEN.	ALIVE	EXAMINER OR DA		DATE P	TE PRONOUNCED			TIME OF DEATH 04:45 AM		
CERTIFIER PHYSICIAN	1 2		1			I			TE CERTIFI	ED	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR SANLAY AMIN, 606 DOTTED RD, DES DI AINES, ILLINOIS, 60016								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.



Cook County Clerk

