

UNOFFICIAL CO

Prepared by:

Kevin T. Kavanaugh, Esq. 3331 W. Big Beaver, Ste. 109 Troy. MI 48084 Licensed in IL. Bar ID No. 6280331

Doc#: 1527317015 Fee: \$44.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00 Karen A.Yarbrough

Cook County Recorder of Deeds Date: 09/30/2015 10:58 AM Pg: 1 of 4

Return to: FNC Title Services, LLC 1300 Piccard Drive, Ste. 105 Rockville, Maryland 20850	i	
D	ECEASED JOINT TE	ENANT AFFIDAVIT OF DEATH
State of Illing as County of $\mathcal{L}_{\mathcal{Q}\mathcal{O}}$)) ss.	Order No. 201506-408
60438. That she was ac	vainted with Andy Be	ell, Deceased, who at the time of his death was one of the n, located in Cook County, Illinois, and described as:
See Exhibit A atta	ached hereto and mad	le a part hereof
That the deceased deceased attached hereto.	died May 15, 2015, as e	evidenced by a certified copy of the death certificate of the
That the deceased died:	4	
Leaving no Last W	√ill & Testament.	
Will should be file Illinois.	ed with the Clerk of the	of which is attached hereto. The original of the unproven e Probate Division of the Circuit Court of Gook County,
	ill & Testament which v rt of Cook County, Illin	was filed in the Unp over Will Box of the Probate Division nois about
That the total value the deceased either individual sum of \$100,000.00 dollars	dually or in joint tenand	deceased, including both real and personal property owned by act the time of death of the deceased, does not exceed the
Affiant makes this Title Insurance Policy, des	s affidavit for that pur cribing the above menti	rpose of inducing the <i>FNC Title Services LLC</i> . to issue its tioned property.
Subscribed and sw	vorn to before me by the	ne said Lucy Bell.
This Ale day of Ale Notary Public	Gust AD 201	By Lucy Bell, Mary I, Bel Lucy Bell as attorney in fact OFFICIAL SEAL PATRICIA D AMOS Notary Public - State of Illinois My Commission Expires Jan 8, 2019

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Exhibit A

ALL THE FOLLOWING DESCRIBED REAL ESTATE, SITUATED IN THE COUNTY OF COOK AND STATE OF ILLINOIS, TO WIT:

LOT 17 (EYCEPT THE NORTH 25 FEET THEREOF) AND LOTS 18, 19 AND 20 IN BLOCK 5, IN LANSING LAKE GARDEN, A SUBDIVISION OF THE NORTHEAST QUARTER OF THE NORTHWEST QUARTER OF SECTION 5, TOWN 35, NORTH, RANGE 15, EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS.

BEING THE SAME.

AUSTEE'S DEED FROM LO.

JUNE 4, 1968 AND RECORD.

PRICE NO. 33:05-103-048-0000 TRUSTEE'S DEED FROM LILA MAE PETERS AND WILLIAM W. WINTERHOFF, DATED

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

	015 00401	21									DA	TE ISSUED	5/19/201	
DECEDENT'S LEGAL NAME ANDY BELL								SEX MALE		OF DEAT				
COUNTY OF DEATH		AGE AT LAST BIRTHO				DATE OF BIRTH					11 10, 2	010		
CITY OR TOWN			87 YEARS						- 16, 1928					
LANSING	HOSPITAL OR OTI 18645 WILLI					THER INSTITUTION NAME								
PLACE OF DEATH DECEDENT'S HOM	E					1				<u></u> -				
BIRTHPLACE	so	CIAL SECUF	ITY NUMBE	R STATU	S AT TIM	NE OF DEATH		SURVIVING SPOU	SE/CD/II LINION DA	07115710		T		
BELARUS			6748 MARRIED			LUCY HARE			E/CIVIL UNION PARTNER'S MAIDEN NAME BACHLIK			EVER IN U.S. ARMED FORCES? NO		
RESIDENCE 18645 WILLIAM ST					APT. I	NO.		OR TOWN	- CONTON			INSIDE CITY LI		
COUNTY	STAT'_	ZIP CODE	FATHERA	CO-PARENT'S	S NAME P	RIOR TO FIRST MA		NSING	11071177177			YES		
COOK		1/0438 ALEXANDER BUS			RIOR TO FIRST MARRIAGE/CIVIL UNION MOTHER/CO-PAI				RENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION					
INFORMANT'S NAME LUCY BELL		RELATIONSHIP WIFE						MAILING ADDRE	ss		SING, IL, 60438			
METHOD OF DISPOSITION			C_OF DIS					LOCATION - CITY OR TOWN AND STAT						
FUNERAL HOME				EMETERY - I					ROCKFORD, IL			MAY 21, 2015		
SCHROEDER-LAUE FUNERAL DIRECTOR'S NAMI	R FUNER	RAL HOM	E, 3227 F	IF GE RI	D., LAI	NSING, IL, 6	0438							
WILLIAM BYMA	<u> </u>						_		FUNERAL DIRE 03401221		DR'S ILLINOIS LICENSE NUMBER			
LOCAL REGISTRAR'S NAME DAVID ORR		0						DATE FILED WITH LOCAL REGISTRAR						
CAUSE OF DEATH P	ARTI. CE	REBRAL A	BTEBIOS	CLEROS!	S AND	V ISCULAR D	CMCN	1714	MAY 19, 2	2015				
IMMEDIATE CAUSE	a.			OLL: 1001	O AND	V ISCULAN D	EIVIEIV	TIA			ĚĔ	VE	- 4 17 0	
(Final disease or condition resulting in death)					Due to (or	as a col. amienco	of):		· · · · · · · · · · · · · · · · · · ·	XIMATE	7 - CF 4T	7.0	ARS	
	b.					C				EXOR:	AND AND			
					Due to (or	as a consequence of	of):)		- AP4	- 30			
	C.					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		12		£	: 5			
DADY II For all and a second					Due to (or	as a consequence of	of):			_	<u> </u>			
PART II. Enter other significan	t conditions	s contributin	g to death	but not resu	lting in th	ne underlying car	use give	en in PART I.	WA	S AN AUTO	OPSY PER	FORMED? NO		
									WE	RE AUTOF	SY FINDIN	GS USED TO		
FEMALE PREGNANCY STATUS									PLETE CAUSE OF DEATH? N/A NER OF DEATH					
NOT AT FLOADLE								TUPAL	ÆAIH		ļ			
DATE OF INJURY			TIME OF IN	UURY		PLACE OF INJU	RY	· · · · · · · · · · · · · · · · · · ·	<u></u>			INJURY AT W	ORK?	
LOCATION OF INJURY					<u>l</u>						<u> </u>	<u> </u>		
DESCRIBE HOW INJURY OCC	URRED:			· · ·							<u>(C</u>			
										IF TRA	ANSPORTA	YON INJURY, S	PECIFY:	
ATTEND THE DECEASED?	DATELA	E LAST SEEN ALIVE WAS MEDICAL EXAMINER OR					10:		<u> </u>					
NO		IKNOWN CORONER CONTA							TIME OF DEATH 08:47 AM			+		
CERTIFIER PHYSICIAN			-		·			.			CERTIFIE	D		
NAME, ADDRESS AND ZIP COL	DE OF PERS	ON COMPLE	TING CAU	SE OF DEA	TH				······································		Y 19, 2			
LYLE MUNN, MD, 85 E US HIGHWAY 6, VALPARAISO, INDIANA, 46383								PHYSICIAN'S LICENSE NUMBER 036049311						



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.



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Property of Cook County Clerk's Office

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