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Doc#: 1527417010 Fee: \$42.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds
Date: 10/01/2015 09:22 AM Pg: 1 of 3

APN: 15-15-230-015-0000

SPACE ABOVE THIS LINE FOR RECORDER'S USE

. 13-13-230-013-0009	GIACLIADO LE TIID BALLI OR RECORDER 5 COL			
AFFIDAVIT - DEAT	TH OF JOINT TENANT			
STATE OF Illinois				
COUNTY OF COOK	SS.			
Ox				
Shirley J. Powell, of legal age, being first auty sworn, de	eposes and says:			
τ	certified copy of Certificate of Death, and is the same personal			
•	age dated November 21, 2012 executed by Oscar Powell ar			
Shirley J. Powell, husband and wife, in joint tenancy	r, rcco ded on January 15, 2013, in Book N/A, Page N/A	A ,		
Instrument No. 1301550087, Official Records of Cook (County, Allinois, describing the following real property:			
SEE EXHIBIT "A" ATTACHED HERETO AND MAI	DE A PART PEKEOF.			
Dated: 08-11-15	Shirley J. Powell	_		
The foregoing was subscribed and sworn to be State of Thirds, this 11th day of Fly	fore me in the County of (00)—, and			
(Seal) OFFICIAL SEAL ALEJANDRA E PARRA	Allputton Notary signature	- _{**}		
NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES 02/24/2019	Printed Name Alejandra E. Parra	-1. 3		
· · · · · · · · · · · · · · · · · · ·	Notary Public, State of Illinois			
	My Commission Expires: 02/24/2019	_ () N		
		Y		
		√ ·		

ATTACH CERTIFIED COPY OF DEATH CERTIFICATE

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM

CETTIFICATION OF DEATH FEGURO

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

ZN#/431031333

STATE FILE NUMBER 2014 000	9215					DATE ISSUE	D 2/10/2014
DECEDENTS LEGAL NAME OSCAR POWELL					SEX MALE	DATE OF DEATH JANUARY 26, 201	4
COUNTY OF DEATH		AGE AT LAST BIRTHDAY 72 YEARS		DATE OF BI	ятн 3ER 03, 1941		
CITY OR TOWN CHICAGO			45.0	RINSTITUTION I			
PLACE OF DEATH NURSING HOME / LONG	TERM CARE	-ACILITY					
BIRTHPLACE CHARLESTON, MS		STATUS AT TIME OF D MARRIED	EATH .	SHIRLEY H	E/CIVIL UNION PARTNE OUSTON		IN U.S. ARMED CES? NO
RESIDENCE 1606:S 13TH AVE		APT NO.		OR TOWN		YES	
COUNTY STATE	ZIP CODE F2155	FATHER/CO PARENT'S NAME PRIOR TO	FIRST MARRIAGE	E/CIVIL UNION	MOTHER/CO-PARENTS LILLIAN BULL	SNAME PRIOR TO FIRST MAR OCK	RIAGE/CIVIL UNION
INFORMANTS NAME SHIRLEY POWELL		RELATIONSHIP WIFE		MAILING ADDRE 1606 S 13T	SS H AVE, MAYWO	OOD, IL, 60153	
METHOD OF DISPOSITION BURIAL		FOF DISPOSITION	**************************************	LOCATION - CIT HILLSIDE, IL	Y OR TOWN AND ST	FATE DATE OF DISPOSE FEBRUARY	
FUNERAL HOME	UNERAL HO	ME, 2027 ROOSEVELT ROA	ID, BROADI	√IEW, IL, 601	55		
FUNERAL DIRECTOR'S NAME RORY JAMES MOMON					FUNERAL DIRECT 034016169	OR'S ILLINOIS LICENSE N	UMBER
LOCAL REGISTRAR'S NAME DAVID ORR					CATE FILED WITH FEBRUARY	LOCAL REGISTRAR 5, 2014	
CAUSE OF DEATH PART I.	CONGESTIVE	HEART FAILURE				A TOP	MONTHS
IMMEDIATE CAUSE 8 (Final disease or condition resulting in death)		Due to (or as a c	::o: ∵ re of):			DXIMATE BETWIND DEA	
						APPROONSET A	
c		Duetto∳orasato	onsequence oty				
		Due to (or as a o	onsequence of)	Ha			
PART II. Enter other significant cond CHRONIC KIDNEY DISEASE			lerlying cause g	iven in PAR		AN AUTOPSY PERFORME E AUTOPSY FINDINGS US	
					COMP	E AUTOPST FINDINGS US PLETE CAUSE OF DEATH NER OF DEATH	
NOT APPLICABLE					.6	TURAL	
DATE OF INJURY		TIME OF INJURY PLAC	E OF INJURY			inj	JBY AT WORK?
LOCATION OF INJURY							
DESCRIBE HOW INJURY OCCURRI						IFTHANSICT ATION	injury specify:
	ATE LAST SEEN.	문학문 및 전 10 1 - 16 15 2 - 2 및 기 - 2 원기 - 2			PRONOUNCED		OF DEATH 16 PM
CERTIFIER PHYSICIAN						DATE GERTIFIED JANUARY 30,	2014
NAME, ADDRESS AND ZIP CODE O	F PERSON COMP	LETING CAUSE OF DEATH				PHYSICIAN'S LICE	



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.

HOWARD EINHORN, 675 W NORTH AVE STE 311, MELROSE PARK, ILLINOIS, 60160





1527417010 Page: 3 of 3

UNOFFICIAL COPY EXHIBIT A

LOT 28 IN CUMMINGS AND FOREMAN'S REAL ESTATE CORPORATION RESUBDIVISION OF LOTS 101 TO 105, 107 TO 115, 120 AND 121, THE NORTH 1/2 OF LOT 123, ALL OF LOTS 124 TO 128, 135 TO 141 AND 144, 148, 149, 153, TO 162, 168 TO 175, 177, TO 178 AND 182 IN SEMINARY ADDITION TO MAYWOOD, BEING A SUBDIVISION OF PART OF THE NORTH EAST 1/4 OF SECTION 15, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Permanent Index Number: 15-15-230-015-0000

SS: 160c.

Of Coot County Clert's Office Property Address: 1606 SOUTH 13TH AVENUE, MAYWOOD, IL 60153