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Doc#: 1600845027 Fee: \$44.00
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Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 01/08/2016 10:32 AM Pg: 1 of 4

Property of Cook County Clerk's Office

DECEASED JOINT TENANCY AFFIDAVIT

PROPERTY ADDRESS:
2901 S. 48TH COURT
CICERO, IL 60804

PIN NO:
16-28-420-001-0000 AND
16-28-420-002-0000

MAIL TO AND PREPARED BY:

Law Office Of Esperanza Rivera-Valenzuela, LLC
6418 W OGDEN AVE
BERWYN, IL 60402

CCRD REVIEWER

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LEGAL DESCRIPTION:

LOTS 15 AND 16 IN THE SUBDIVISION OF LOTS 1,2, 11 AND 12 IN BLOCK 13 IN HAWTHORNE IN THE SOUTHEAST $\frac{1}{4}$ OF SECTION 28, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PROPERTY ADDRESS:

**2901 S. 48TH COURT
CICERO, IL 60804**

PIN NO:

**16-28-420-001-0000 AND
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**COOK COUNTY CLERK VITAL RECORDS
CHICAGO, ILLINOIS
MEDICAL CERTIFICATE OF DEATH**

STATE FILE NUMBER 2014 0062184

DATE ISSUED 2/11/2015

DECEDENT'S LEGAL NAME HUBERT BETANCOURT		SEX MALE	DATE OF DEATH AUGUST 17, 2014	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 60 YEARS		DATE OF BIRTH SEPTEMBER 09, 1953	
CITY OR TOWN PROVISO TWP		HOSPITAL OR OTHER INSTITUTION NAME FOSTER G MC GAW HOSPITAL		
PLACE OF DEATH INPATIENT				
BIRTHPLACE MEXICO	SOCIAL SECURITY NUMBER [REDACTED] 4403	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME AGUSTINA BELTRAN	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 2901 SOUTH 48TH CT		APT. NO.	CITY OR TOWN CICERO	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60804	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION LAZARO SERRANO	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION BERTHA BETANCOURT
INFORMANT'S NAME AGUSTINA BETANCOURT		RELATIONSHIP WIFE	MAILING ADDRESS 2901 SOUTH 48TH CT, CICERO, IL, 60804	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION FOREST HOME CEMETERY	LOCATION - CITY OR TOWN AND STATE FOREST PARK, IL	DATE OF DISPOSITION AUGUST 20, 2014	
FUNERAL HOME KOPICKI'S HERITAGE FUNERAL HOME, 3117 SOUTH OAK PARK AVENUE, BERWYN, IL, 60402				
FUNERAL DIRECTOR'S NAME KEVIN THADDEUS KOPICKI			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034012134	
LOCAL REGISTRAR'S NAME ANTHONY WILLIAMS			DATE FILED WITH LOCAL REGISTRAR AUGUST 19, 2014	
CAUSE OF DEATH PART I. LIVER FAILURE				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a. _____ Due to (or as a consequence of):		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
		b. SEPTIC SHOCK Due to (or as a consequence of):		
		c. _____ 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. HYPERTENSION			WAS AN AUTOPSY PERFORMED? NO	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
FEMALE PREGNANCY STATUS NOT APPLICABLE			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? NO	DATE LAST SEEN ALIVE UNKNOWN	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 07:34 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED AUGUST 18, 2014	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH KAITLIN WANTA, 2160 SOUTH FIRST AVENUE, MAYWOOD, ILLINOIS, 60153				PHYSICIAN'S LICENSE NUMBER 125063659



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

NOT EMBOSSED STATE AND COUNTY SEALS AT BOTTOM