



# UNOFFICIAL COPY

ATTORNEYS' TITLE GUARANTY FUND, INC.

## LEGAL DESCRIPTION

**Permanent Index Number:**

Property ID: 03-05-413-039-0000

**Property Address:**

714 Golfview Terrace  
Buffalo Grove, IL 60089

**Legal Description:**

LOT 128 IN THE APLINGTON ADDITION TO BUFFALO GROVE, BEING A SUBDIVISION IN SECTIONS 4 AND 5, TOWNSHIP 42 NORTH, RANGE 11, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office

**UNOFFICIAL COPY****CERTIFICATION OF DEATH RECORD**

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

STATE FILE NUMBER 2011 0097599

DATE ISSUED 01/08/2012

DECEDENT'S LEGAL NAME <b>GRANT JOSEPH WONDERS</b>		SEX <b>MALE</b>	DATE OF DEATH <b>DECEMBER 29, 2011</b>	
COUNTY OF DEATH <b>COOK</b>	AGE AT LAST BIRTHDAY <b>59 YEARS</b>	DATE OF BIRTH <b>JANUARY 28, 1952</b>		
CITY OR TOWN <b>PARK RIDGE</b>		HOSPITAL OR OTHER INSTITUTION NAME <b>ADVOCATE LUTHERAN GENERAL HOSPITAL</b>		
PLACE OF DEATH <b>INPATIENT</b>				
BIRTHPLACE <b>OAK PARK, IL</b>	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH <b>MARRIED</b>	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME <b>MARGARET GILLEN</b>	EVER IN U.S. ARMED FORCES? <b>NO</b>
RESIDENCE <b>714 GOLFVIEW TERRACE</b>		APT. NO.	CITY OR TOWN <b>BUFFALO GROVE</b>	INSIDE CITY LIMITS? <b>YES</b>
COUNTY <b>COOK</b>	STATE <b>IL</b>	ZIP CODE <b>60089</b>	FATHER/CO-PARENTS NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION <b>GRANT EDWARD WONDERS</b>	MOTHER/CO-PARENTS NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION <b>JULIA JANE DENCKER</b>
INFORMANT'S NAME <b>MARGARET WONDERS</b>		RELATIONSHIP <b>WIFE</b>	MAILING ADDRESS <b>714 GOLFVIEW TERRACE BUFFALO GROVE IL 60089</b>	
METHOD OF DISPOSITION <b>CREMATION</b>		PLACE OF DISPOSITION <b>LAKEMOOD CREMATORIUM</b>	LOCATION - CITY OR TOWN AND STATE <b>GREEN OAKS, IL</b>	DATE OF DISPOSITION <b>JANUARY 01, 2012</b>
FUNERAL HOME <b>REINERT-WONDERS SERVES, INC., 101 PARK PLACE, LIBERTYVILLE, IL, 60048</b>				
FUNERAL DIRECTOR'S NAME <b>EILEEN WONDERS REINERT</b>			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER <b>034011584</b>	
LOCAL REGISTRAR'S NAME <b>DAVID ORR</b>			DATE FILED WITH LOCAL REGISTRAR <b>DECEMBER 30, 2011</b>	
CAUSE OF DEATH PART 1: <b>POORLY DIFFERENTIATED ADENOCARCINOMA</b>				<b>8 WEEKS</b>
IMMEDIATE CAUSE (Final disease or condition resulting in death)				
Due to (or as a consequence of)				
Due to (or as a consequence of)				
PART 2: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART 1				WAS AN AUTOPSY PERFORMED? <b>NO</b>
				WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? <b>N/A</b>
FEMALE PREGNANCY STATUS <b>NOT APPLICABLE</b>				MANNER OF DEATH <b>NATURAL</b>
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? <b>YES</b>	DATE LAST SEEN ALIVE <b>DECEMBER 29, 2011</b>	WAS MEDICAL EXAMINER OR CORONER CONTACTED? <b>UNKNOWN</b>	DATE PRONOUNCED	TIME OF DEATH <b>04 20 PM</b>
CERTIFIER <b>PHYSICIAN</b>			DATE CERTIFIED <b>DECEMBER 30, 2011</b>	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH <b>MITUL DESAI, 1775 DEMPSTER ST. PARK RIDGE, ILLINOIS, 60068</b>				PHYSICIAN'S LICENSE NUMBER <b>036108781</b>

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

NOTE: FACILE SECURITY HOLOGRAPHIC FOLDS AT BOTTOM