



# UNOFFICIAL COPY

## LEGAL DESCRIPTION RIDER

For the premises commonly known as: 10312 S. 81<sup>st</sup> Court, Palos Hills, Illinois 60465.

Permanent Index Number: 23-14-220-019-0000

LOT 68 IN LANSDOWNE'S HICKORY HILLS, A SUBDIVISION OF THE NORTHEAST 1/4 OF THE NORTHEAST 1/4 OF SECTION 14, TOWNSHIP 37 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office

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

STATE FILE NUMBER 2016 0088034

DATE ISSUED 11/14/2016

DECEDENT'S LEGAL NAME THOMAS RIVERA		SEX MALE	DATE OF DEATH NOVEMBER 08, 2016	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 75 YEARS	DATE OF BIRTH NOVEMBER 22, 1940		
CITY OR TOWN PALOS HEIGHTS		HOSPITAL OR OTHER INSTITUTION NAME MANORCARE AT PALOS HTS WEST		
PLACE OF DEATH NURSING HOME / LONG TERM CARE FACILITY				
BIRTHPLACE UNKNOWN, PR	SOCIAL SECURITY NUMBER [REDACTED]	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME ARLENE SLATTERY	EVER IN U.S. ARMED FORCES? YES
RESIDENCE 10312 S 81ST COURT	APT. NO.	CITY OR TOWN PALOS HILLS	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60465	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION UNAVAILABLE	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION UNAVAILABLE
INFORMANT'S NAME ARLENE RIVERA		RELATIONSHIP WIFE	MAILING ADDRESS 10312 S 81ST COURT, PALOS HILLS, IL, 60465	
METHOD OF DISPOSITION DONATION	PLACE OF DISPOSITION NORTH ILLINOIS UNIVERSITY BIOLOGICAL SCIENCES	LOCATION - CITY OR TOWN AND STATE DEKALB, IL	DATE OF DISPOSITION NOVEMBER 08, 2016	
FUNERAL HOME KERRY FUNERAL HOME; 7020 W. 127TH STREET, PALOS HEIGHTS, IL, 60463				
FUNERAL DIRECTOR'S NAME MICHAEL J ORRICO			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015888	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR NOVEMBER 14, 2016	
CAUSE OF DEATH	PART I	MULTIPLE MYELOMA		WEEKS
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a.	Due to (or as a consequence of)		
	b.	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.				APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
FEMALE PREGNANCY STATUS NOT APPLICABLE			WAS AN AUTOPSY PERFORMED? NO	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
			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? YES	DATE LAST SEEN ALIVE NOVEMBER 07, 2016	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 01:50 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED NOVEMBER 09, 2016	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH HAMDI KHILFEH, M.D., 2955 W. 95TH STREET, EVERGREEN PARK, ILLINOIS, 60805				PHYSICIAN'S LICENSE NUMBER 036110790

DECEDENT ALIAS  
AKA: TOMAS RIVERA

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

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM