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Boc# 1710847174 Fee \$42.00

RHSP FEE: \$9.00 RPRF FEE: \$1.00

KAREN A.YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 04/18/2017 02:26 PM PG: 1 OF 3

AFFIDAVIT OF DEATH

State of War S
County of
RICKY T. GROCKOWKKI, of legal age, being first duly sworn, deposes and says: (PRINT NAME)
That Kathleen Jean Grochowski, the decedent mentioned in the attached
DATE AUBUST 19, 2016
Gel J. Mle SIGNATURE
SUBSCRIBED AND SWORN TO (or affirmed) before me on this Acust 19,2016 day of
20. by Ricky T Grochowski
proved to me on the basis of satisfactory evidence to be the persons(s) who appeared before me.
My Commission Expires: 4/28/20
Notary Signature  Notary Public Commissioned for said County and State
Order # 800853

Official Seal Notary Public - State of Illinois My Commission Expires Apr 28, 2020

1710847174 Page: 2 of 3

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#### CERTIFICATION OF DEATH RECORD

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

STATE FILE NUMBER 2015 0090586									DATE ISSUED	11/19/2	
DECEDENT'S LEGAL NAME KATHLEEN JEAN GROCHOWSKI							SEX FEMALE	DATE OF D NOVEN	MBER 16, 2015	-	
COUNTY OF DEATH AGE AT LAS COOK 61 YEA								)54			
CITY OR TOWN ARLINGTON HEIGHTS				HOSPITAL OR OTHER INSTITUTION NAME MIDWEST CARE CENTER HOSPICE - 1					ST COMM HOSI	p	
PLACE OF DEATH HOSPICE FACILITY											
BIRTHPLACE SOCIAL SECURITY NUMBER CHICAGO, IL 347-48-9718							SECUVIL UNION PARTNERS MAIORN NAME EVER I OCHOWSKI FORCE			S ARMED	
RESIDENCE 303 W EVERGREEN A	APT. NO CITY OR TOWN MT PROSPECT				INSIDE CITY UMITS? YES						
COUNTY STA		HERICO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION AMES V SCHRAM				MOTHER COPARENTS NAME PRIOR TO FIRST MARRIAGE COLL UNION STEPHANIE R GASINSKI					
INFORMANTS NAME RICKY GROCHOWSKI		MAILING ADDRESS 303 W EVERGREEN AVENUE, MT PROSPECT, IL.				, tl., 6005 <b>6</b>					
METHOD OF DISPOSITION  CREMATION  CREMATION  AACE OF DISPOSITION  FOREST CRE									TE OF DISPOSITION OVEMBER 20, 2	OF DISPOSITION VEMBER 20, 2015	
FUNERAL HOME CREMATION SOCIETY	OF ILLINOIS - I	MULINT P	ROSPECT,	1030 EAST N	юятн	WEST HIGH	IWAY, MT PF	OSPECT,	IL, 60056		
FUNERAL DIRECTOR'S NAME KATARZYNA BEATA MOLEK							FUNERAL DIRE 03401670	RECTOR'S ILLINOIS LICENSE NUMBEA 708			
LOCAL REGISTRAR'S NAME DAVID ORR						DATE FILED WITH LOCAL REGISTRAR NOVEMBER 19, 2015					
CAUSE OF DEATH PART UKMEDIATE CAUSE	FI METASTATIO	RECTAL	CANCER				"		11 N	MTMON	
First Preser or condition resulting in death)	b	`	Due t	(Dr 8), 1 (D7840-470)	• 15		<del></del> -				
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METASTATIC BREAST CA					anza dive	en in PALITT			Y PERFORMED? N		
FEMALE PREGNANCY STATUS									E OF DEATH? N/A		
NOT PREGNANT WITH	IIN LAST YEAR						// //	YNER OF DEA' NTURAL	DΗ		
DATE OF INJURY TIME OF IN			HAY PLACE OF INJURY						INU AT	WORK7	
LOCATION OF BAJURY				<u> </u>		<del></del>			Ç.	<del></del>	
DESCRISE HOW INJURY OCCUR	RED							IF TRANS	FJRT (TION INJURY	SPECIF	
YES DATE LAST SEENALIVE NOVEMBER 15, 2015			•	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO			DATE PRONOUNCED		TIME OF DEATH 12:52 AM		
CEAT FIER FHYSICIAN				<del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·		DATE CE NOVI	RTIFIED EMBER 18, 2015	5	
NAME ADDRESS AND ZIP CODE	O P PSON COMPL	ETING CAU	SE OF DEATH	<del></del>					CIAN'S LICENSE NU		



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 Cook County Clerk



1710847174 Page: 3 of 3

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#### **EXHIBIT A**

#### **LEGAL DESCRIPTION**

The following described real estate situated in the County of Cook, in the State of Illinois, to wit:

Lot 154 in the H. Roy Berry Co's Colonial Manor, being a subdivision of part of the Northeast 1/4 of Section 11 and part of the Northwest 1/4 of Section 12, all in the Township 41 North, Range 11, East of the Third Principal Meridian, in Cook County, Illinois.

Tax ID: 08-11-213-901-0000

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