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Doc# 1715929091 Fee \$42.00

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

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 06/08/2017 04:39 PM PG: 1 OF 3

Property of Cook County Clerk's Office

DECEASED JOINT TENANCY AFFIDAVIT

State of Illinois )  
                                ) ss.  
County of Will )

JULIE NORDSTROM being duly sworn states that she resides at  
13 ARROWHEAD, THORNTON, IL 60476

That she was acquainted with ROBERT NORDSTROM  
deceased who, at the time of death, was one of the owners of the land  
in COOK County, Illinois, described as:

LOT 160 (EXCEPT THAT PART WEST OF A LINE WHICH INTERSECTS THE NORTH  
BOUNDARY OF SAID LOT 160, 7.72 FEET EAST OF ITS NORTHWEST CORNER AND PASSES  
THROUGH THE SOUTHWEST CORNER OF SAID LOT 160) AND LOT 161 IN TOEPFER'S  
THORNWOOD SUBDIVISION, A SUBDIVISION OF THE NORTH ¼ OF THE WEST ½ OF THE  
SOUTHEAST ¼ OF SECTION 27, TOWNSHIP 35 NORTH, RANGE 14, EAST OF THE THIRD  
PRINCIPAL MERIDIAN, (EXCEPT THEREFROM THAT PART CONVEYED TO COUNTY OF  
COOK BY DEED DATED AUGUST 8, 1944 AND RECORDED SEPTEMBER 26, 1944 IN BOOK  
39325, PAGE 533 AS DOCUMENT 13363699) ACCORDING TO THE PLAT THEREOF RECORDED  
MAY 8, 1956 AS DOCUMENT 16573860 IN COOK COUNTY, ILLINOIS.

PIN: 29-27-404-002-0000

Commonly known as: 13 ARROWHEAD, THORNTON, IL 60476

That the deceased died JULY 11, 2015 , as evidenced by a certified  
copy of death certificate of the deceased attached hereto.

That the deceased died:

- X    Leaving no Last Will & Testament
- Leaving a Last Will & Testament a copy of which is attached  
hereto. The original of the unproven will should be filed with  
the Clerk of the Probate Division of the Circuit Court of  
\_\_\_\_\_ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven

*(Handwritten signature/initials)*

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Will Box of the Probate Division of the Circuit Court of \_\_\_\_\_ County, Illinois about \_\_\_\_\_.

That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of NINETY FIVE THOUSAND dollars.

Affiant makes this affidavit for the purpose of inducing ANY \_\_\_\_\_ Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

*Julia Christensen*  
(Affiant's Signature)

Subscribed and sworn to before me this 7th day of JUNE, 2017.

*Edward V. Sharkey*  
Notary Public



This instrument prepared by:

ATTY. EDWARD V. SHARKEY  
9991 - 191<sup>ST</sup> ST.  
MOKENA, IL 60448

After recording mail to:

Sharkey & Conroy, P. C.  
9991 - 191<sup>ST</sup> St.  
Mokena, IL 60448

# CERTIFICATION OF DEATH RECORD

## UNOFFICIAL COPY

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

STATE FILE NUMBER 2015 0055163

DATE ISSUED 8/24/2015

DECEDENT'S LEGAL NAME ROBERT M NORDSTROM		SEX MALE	DATE OF DEATH JULY 11, 2015	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 71 YEARS	DATE OF BIRTH JULY 19, 1943		
CITY OR TOWN THORNTON		HOSPITAL OR OTHER INSTITUTION NAME 13 ARROWHEAD		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE EVERGREEN PARK, IL	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME JULIE A WOOD	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 13 ARROWHEAD	APT. NO.	CITY OR TOWN THORNTON	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60476	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION CLARENCE NORDSTROM	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION EVELYN MCEWEN
INFORMANT'S NAME JULIE NORDSTROM		RELATIONSHIP WIFE	MAILING ADDRESS 13 ARROWHEAD, THORNTON, IL, 60476	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION HOLY CROSS CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE CALUMET CITY, IL	DATE OF DISPOSITION JULY 16, 2015	
FUNERAL HOME TEWS-RYAN FUNERAL HOMES, 18230 DIXIE HWY., HOMEWOOD, IL, 60430				
FUNERAL DIRECTOR'S NAME MICHAEL J SCHAUSBURGER			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011635	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR JULY 14, 2015	
CAUSE OF DEATH PART I. LUNG CANCER				
IMMEDIATE CAUSE (Final disease or condition resulting in death)				
Due to (or as a consequence of)				
Due to (or as a consequence of)				
Due to (or as a consequence of)				
PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.				
			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 08:45 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED JULY 14, 2015	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR MUHAMMED LONGI, 1423 CHICAGO ROAD, CHICAGO HEIGHTS, ILLINOIS, 60411			PHYSICIAN'S LICENSE NUMBER 036089100	

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM



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