

UNOFFICIAL COPY

AFTER RECORDING, MAIL TO:

SATURN TITLE, LLC
1030 W. HIGGINS RD.
SUITE 365
PARK RIDGE, IL 60068



1802949223

Doc# 1802949223 Fee \$64.00

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

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 01/29/2018 11:26 AM PG: 1 OF 3

SPECIAL NOTICE:

This form is **NOT** required by law, nor the Cook County Recorder of Deeds (CCRD). CCRD employees **CANNOT** assist with the preparation of this, or **ANY LEGAL FORM.**

1720734
143

PREPARED BY:

KEVIN O'ROURKE
7819 W. LAWRENCE
NORRIDGE, IL 60706

SURVIVING TENANT AFFIDAVIT

I, THOMAS MULLIN the surviving tenant of the tenancy created by the deed with the document number: _____ do hereby declare under oath that the tenant _____ died on 4-30-16 as evidenced by the attached certified copy of her/his death certificate (see attached).

I also declare that the aforementioned tenant was an owner of property with the following details:

LEGAL DESCRIPTION

attached.

PROPERTY IDENTIFICATION NUMBER (PIN)

1 0 - 3 1 - 3 0 6 - 0 1 2 - 0 0 0 0

COMMONLY KNOWN ADDRESS:

NOTARY & AFFIANT SIGNATURE SECTION BELOW

Subscribed & Sworn to me by:

THOMAS MULLIN

Affiant Signature:

[Signature]

On the Following Date:

1-22-18

AFFIX OFFICE SEAL OF NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES: 01/12/20 IN THIS SECTION

[Handwritten mark]

WISCONSIN CERTIFICATE OF VITAL RECORD

WARNING: IT IS A FELONY TO COPY OR REPRODUCE THIS CERTIFICATE - STATE STATUTE 69.24(1)

UNOFFICIAL COPY

STATE OF WISCONSIN
DEPARTMENT OF HEALTH SERVICES
ORIGINAL CERTIFICATE OF DEATH
FACT OF DEATH

STATE FILE DATE: MAY 03, 2016
STATE FILE NUMBER: 2016017326

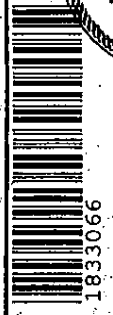
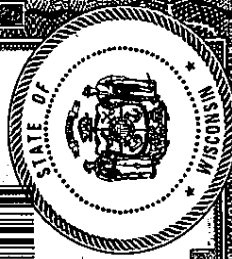
1. DECEDENT'S NAME First STEPHEN	2. SOCIAL SECURITY NUMBER	3. DATE PRONOUNCED DEAD
4. TIME PRONOUNCED DEAD (24hr) 14:15		APRIL 30, 2016
5. AGE 59 YEARS	6. DATE OF BIRTH FEBRUARY 24, 1957	7. SEX MALE
8. CITY, VILLAGE, OR TOWNSHIP OF DEATH WILLIAMS BAY (VILLAGE)	9. COUNTY OF DEATH WALWORTH	
10. PLACE OF DEATH DECEDENT'S RESIDENCE - HOSPICE CARE	11. FACILITY NAME AND ADDRESS OF DEATH 30 CONGRESS STREET WILLIAMS BAY (VILLAGE)	
12. RESIDENCE ADDRESS 30 CONGRESS STREET	13. RESIDENCE CITY, VILLAGE, OR TOWNSHIP WILLIAMS BAY (VILLAGE)	14. RESIDENCE COUNTY WALWORTH
15. RESIDENCE STATE WISCONSIN	16. MARITAL STATUS MARRIED	17. WI DOMESTIC PARTNERSHIP NO
18. SURVIVING SPOUSE'S BIRTH NAME DARLENE KAY BERTHOW	19. STATE OF BIRTH ILLINOIS	20. DECEDENT'S BIRTH LAST NAME MURRIN
21. FATHER'S BIRTH NAME EDWARD THOMAS MURRIN	22. MOTHER'S BIRTH NAME MARIAN ESBROOK	
23. INFORMANT'S NAME DARLENE KAY MURRIN	24. INFORMANT'S MAILING ADDRESS 30 CONGRESS STREET, WILLIAMS BAY, WI 53191	
25. NAME AND ADDRESS OF FUNERAL FACILITY STEINKE FUNERAL HOME INC, 515 CENTER ST, LAKE GENEVA, WI 53147	26. FUNERAL DIRECTOR'S NAME STEINKE, GERALD	27. DATE SIGNED MAY 02, 2016
28. MANNER OF DEATH NATURAL	29. TYPE OF MEDICAL CERTIFIER PHYSICIAN	31. DATE SIGNED MAY 02, 2016
30. DATE OF DEATH APRIL 30, 2016	32. TIME OF DEATH (24hr) 14:15	

EXTENDED FACT OF DEATH

35. USUAL OCCUPATION POLICE PATROL OFFICER	36. KIND OF BUSINESS/INDUSTRY LAW ENFORCEMENT	37. EVER IN US ARMED FORCES NO	38. DECEDENT TRIBAL MEMBER TRIBE NAME(S):
39. METHOD OF DISPOSITION CREMATION	40. PLACE AND LOCATION OF DISPOSITION SOUTHERN LAKES CREMATORY, ELKHORN, WISCONSIN		
41. PART 1. The conditions listed are the diseases, injuries, or complications that caused death. Conditions leading to the immediate cause are listed sequentially and the underlying cause is listed last. Immediate Cause: (a) METASTATIC LUNG CANCER Due to or as a consequence of: (b) _____ Due to or as a consequence of: (c) _____ Due to or as a consequence of: (d) _____			
42. AUTOPSY PERFORMED NO			
43. DATE OF INJURY	44. TIME OF INJURY (24hr)	45. INJURY AT WORK	46. PLACE OF INJURY
47. LOCATION OF INJURY			
48. COUNTY OF INJURY			
49. IF INJURY STATED ANYWHERE IN CAUSE OF DEATH (Part I or Part II), DESCRIBE HOW IT OCCURRED.			

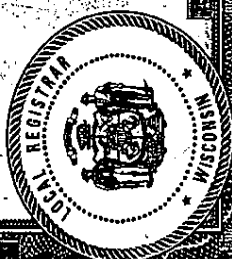
COPD; ATRIAL FIBRILLATION; HISTORY OF CVA

Interval Between Onset and Death
3 MONTHS



SEE REVERSE SIDE FOR AMENDMENTS
I certify that this document contains a true and correct reproduction of facts on file with the Wisconsin Vital Records Office.

Donna R. Pruess
DONNA R. PRUESS
WALWORTH COUNTY REGISTER OF DEEDS



15994040 Date Issued: JUNE 15, 2016

WARNING: IT IS A FELONY TO COPY OR REPRODUCE THIS CERTIFICATE - STATE STATUTE 69.24(1)

THIS CERTIFICATE HAS A BLUE/PINK/BLUE BACKGROUND ON THE FACE AND TWO RAISED SEALS. THE PAPER CONTAINS A VISIBLE CHAIN LINK WATERMARK. HOLD TO LIGHT TO VERIFY PRESENCE.

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American Land Title Association

File Number : 1720734
Commitment for Title Insurance
Adopted 6-17-06 Revised 08-01-2016

EXHIBIT A

Legal:

LOT 3 IN GERALD THOMAS' RESUBDIVISION OF LOT 8 (EXCEPT THE NORTH 236.15 FEET THEREOF) IN FREDERICK EBINGER'S SUBDIVISION OF 67.90 ACRES IN THE SOUTHWEST QUARTER OF SECTION 31, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS.

Address: 6518 N. Neva Ave, Chicago, IL 60631

PIN #: 10-31-306-012-0000

PIN #:

PIN #:

Township: Jefferson

This page is only a part of a 2016 ALTA® Commitment for Title Insurance(issued by Fidelity National Title Insurance Company). This Commitment is not valid without the Notice; the Commitment to Issue Policy; the Commitment Conditions; Schedule A; Schedule B, Part I-Requirements; (and) Schedule B, Part II-Exceptions; and a counter-signature by the Company or its issuing agent that may be in electronic form).

