UNOFFICIAL



AFFIDAVIT OF TRUSTEE SUCCESSION

MAIL RECORDED AFFIDAVIT TO: Robert G. Goodsell 429 Cherry Lane Glenview, Illinois 60025

STATE OF ILLINOIS

COUNTY OF COOK

Doc# 1805949262 Fee \$40.00

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

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 02/28/2018 02:28 PM PG: 1 OF 2

ROBERT G. GOODSELL, who has succeeded to the co-trusteeship of BARBARA A. GOODSELL DECLARATION OF TRUST DATED OCTOBER 27, 2000, on oath deposes and says that:

1. Affiant resides at 429 Cherry Lane, Glenview, Illinois 60025.

)SS

- 2. The BARBARA A. GOODSELL DECLARATION OF TRUST DATED OCTOBER 27, 2000 (the "Original Trust") was amended only once on August 31, 2012, which amendment included a complete restatement of the terms of the Original Trust. The Original Trust as it has been amended to the date hereof shall be referred to herein as in "Trust".
- 3. Affiant became a Successor Co trustee of the Trust as of the death of BARBARA A GOODSELL (the "Decedent) on June 30, 2017.
- The Decedent had acted as sole trustee of the Trust from its inception until her death. A redacted, certified copy 4. of Decedent's Certification of Death Record is attached hereto.
- 5. One of the assets of the Trust is that parcel of real estate commonly known as 514 Hazelwood Lane, Glenview, Illinois 60025, and legally described as:

Lot 45 in Nixon's Greenwood Central Development Unit A, being a subdivision of part of the West Half (W-1/2) of the West Fractional Half of Section 11, Township 41 North, Range 12, East of the Third Principal Meridian, in Cook County, Illinois.

Permanent Real Estate Index Number: 09-11-100-005-0000

Address of real estate: 514 Hazelwood Lane, Glenview, Illinois 60025

- 10. As of Decedent's death, Affiant and BARBARA BLIEFERNICH succeeded to the co-trus' ceship of the Trust and are acting as such as of the date hereof.
- 7. As of the date hereof, the Trust is in full force and effect and without further amendment.

SUBSCRIBED and sworn to before me this / M

of August, 2017.

OFFICIAL SEAL JOHN M MUELLER

NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires October 29, 2018

Notary Public

Prepared by: John M. Mueller, Furnier Muzzo Group LLC, 2103 Norwich Court, Glenview, Illinois 60026.

GLENVIEW TERRACE NURSING CTR

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COOK COUNTY CLERK VITAL RECORDS CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2017 0053414

DATE ISSUED 7/5/2017 DECEDENT'S LEGAL NAME DATE OF DEATH BARBARA ANN GOODSELL FÉMALE: JUNE 30, 2017 COUNTY OF DEATH AGE AT LAST BIRTHDAY DATE OF BIRTH COOK 79 YEARS APRIL 26, 1938 CITY OR TOWN HOSPITAL OR OTHER INSTITUTION NAME GLENVIEW

PLACE OF DEATH

NURSING HOME / LONG TERM CARE FACILITY

SOCIAL SECURITY NUMBER STATUS AT TIME OF DEATH BIRTHPLACE SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME EVER IN U.S. ARMED REDACTED | MARRIED ROBERT GOODSELL RESIDENCE: CITY OR TOWN: INSIDE CITY LIMITS? 429 CHERRY LN GLENVIEW. YES:

COUNTY STATE ZIP CODE FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION COOK 6 7025 ALBERT M SIMMONS

MOTHER/CO PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ANNA LABAV MAILING ADDRESS

RELATIONSHIP. HUSBAND PLACE OF DISPOSITION

FUREST CREMATORY

429 CHERRY LN GLENVIEW IL, 60025

LOCATION CITY OR TOWN AND STATE DATE OF DISPOSITION ROMEOVILLE, IL JULY 06, 2017

FUNERAL HOME

CREMATION

INFORMANT'S NAME

ROBERT GOODSELL

METHOD OF DISPOSITION

CREMATION SOCIETY OF ILLINOIS MOUNT PROSPECT, 1030 EAST NORTHWEST HIGHWAY MT PROSPECT, ILL 60056

FUNERAL DIRECTOR'S NAME FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER MEGAN ELIZABETH SCHLEGEL 034016962 LOCAL REGISTRAR'S NAME DATE FILED WITH LOCAL REGISTRAR DAVID ORR JULY 5, 2017

CAUSE OF DEATH PART I END STAGE CHRONIC OBSTRUCTIVE F. LMONARY DISEASE

IMMEDIATE CAUSE (Final disease or condition resulting in death)

PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART.

ANEMIA FEMALE PREGNANCY STATUS

ŤIME OF INJURY

WAS AN AUTOPSY PERFORMED? NO WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A MANNER OF DEATH NATURAL INJURY AT WORK?.

LOCATION OF INJURY

DATÉ ÓF INJURY

NOT APPLICABLE

DESCRIBE HOW INJURY OCCURRED IF TRANSPO (1.41) ON INJURY, SPECIFY.

PLACE OF INJURY

ATTEND THE DECEASED? DATE LAST SEEN ALIVE WAS MEDICAL EXAMINER OF DATE PRONOUNCED TIME OF DEATH YES JUNE 29, 2017 CORONER CONTACTED? NO 09.20 AM CÉRTIFIÉE

PHYSICIAN JULY 03, 2017

NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH PHYSICIAN'S LICENSE NUMBER MARTIN KOVACHEVICH, 2050 PFINGSTEN RD, GLENVIEW, ILLINOIS, 60026 036055036



D00016134



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



