UNOFFICIAL COPY

SPECIAL NOTICE:

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

Fernando Villegas 2556 W. Fullertun Aug Chicago, Ii. 60647



EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 03/09/2020 10:06 AM PG: 1 OF 3

SURYIVING TENANT AFFIDAVIT				
I, Jaime Rojas the surviving tenant of the tenancy created by the deed with the document				
number: 6804405166do hereby declare under oath that the tenant Vilma Y. Toledo				
died on 12/23/20/2 as evidenced by the at ac red 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:				
See Atachment				
C ₂				
PROPERTY IDENTIFICATION NUMBER (PAR)				
15-08-216-059-0000				
COMMONLY KNOWN ADDRESS:				
120 HYDE PARK				
BELLWOOD, 1L. 60104				
NOTARY & AFFIANT SIGNATURE SECTION BELOW				
Subscribed & Sworn to me by: Subscribed & Sworn to me by: OFFICIAL SEAL				
On the Following Date:				

2006955005 Page: 2 of 3 1824245007 Page: 2 of 2 UNOFFICIAL

EXHIBIT TO SCRIVENERS ERROR AFFIDAVIT: CORRECT PROPERTY INFORMATION

Legal Description:

PARCEL ONE: LOT 159, (EXCEPT THE SOUTH 8-1/3 FEET THEREOF), IN ST. CHARLES ROAD FIRST ADDITION TO PROVISO, BEING A SUBDIVISION OF THE NORTH HALF OF SECTION 8, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. PARCEL TWO; THE SOUTH 16.67 FEET OF LOT 160 IN ST. CHARLES ROAD FIRST ADDITION TO PROVISO, BEING A SUBDIVISION OF THE WEST HALF OF THE EAST HALF OF THE NORTHEAST QUARTER, (LYING NORTH OF ST. CHARLES ROAD) OF SECTION 8, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS (EXCEPT THAT PART CONVEYED TO THE CHICAGO AND NORTHWESTERN RAILWAY), IN COOK COUNTY, ILLINOIS.

Property Address:

JA COUNTY CIONAS ONES 120 Hyde Park Avenue Bellwood, IL 60 104

PIN(s):

15-08-216-059-0000

CERTIFICATION OF CULTANIA LAI AV

VILLAGE OF LIBERTYVILLE

LIBERTYVILLE, ILLINOIS MEDICAL CERTIFICATE OF DEATH

T AND TO THE PARTY OF THE PARTY

The second secon				
DECEDENTS LEGAL NAME VILMA YOLANDA TOLED	oo oo	SEX FEMALE	DATE OF DEATH DECEMBER 23, 2012	
COUNTY OF DEATH LAKE	AGE AT LAST BIRTHDAY 50 YEARS	DATE OF BIRTH NOVEMBER 06,	1962	
CITY OR TOWN) HOSPITAL OR OTHER INSTITUTION NAME ADVOCATE CONDELL MEDICAL CENTER				
PLACE OF DEATH				
BIRTHPLACE MEXICO	SOCIAL SECURITY NUMBER STATUS AT TIME OF DEATH	SURVIVING SPOUSE/CIVIL UNION JAIME ROJAS	PARTNER'S MAIDEN NAME EVER IN U.S. ARMED FORCES? NO	
RESIDENCE 289 EAST ROCKLAND	OAD APT.NO.	CITY OR TOWN LIBERTYVILLE	INSIDE CITY LIMITS?	
COUNTY: STATE	a sera tieta tesat eras aras pera tieta tera	The second secon	ARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION	
INFORMANT'S NAME JAIME ROJAS	RELATIONSHIP HUSBAND	MAILING ADDRESS 289 EAST ROCKLAND ROAD		
METHOD OF DISPOSITION	LACE OF DISPOSITION LACE OF DISPOSITION	LOCATION CITY OR TOWN A	AND STATE DATE OF DISPOSITION	
FUNERAL HOME		GREEN OAKS, IL	DECEMBER 26, 2012.	
FUNERAL DIRECTOR'S NAME MARK A WILLHITE	PEL& CREMATOR'UM 410 E. BELVIDERE RD.,	FUNERAL D	IRECTOR'S ILLINOIS LICENSE NUMBER	
LOCAL REGISTRAR'S NAME KEVIN J. BOWENS			WITH LOCAL REGISTRAR	
KEVIN O BOWENS		DECEN	IBER 28, 2012	
CAUSE OF DEATH PART I.	AORTIC STENOSIS		A THE	
(Final disease or condition resulting in death)	Due to (or as a c insequence of	on /	THE CANADA	
	Due to (or as a consequence	in .	APPT VIERA VIERA	
C				
	Due to (or as a consequence of	00		
PART II Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I				
			WERE AUTOPSY FINDINGS USED TO	
FEMALE PREGNANCY STATUS	LIAST VEAD		COMPLETE CAUSE OF DEATH? N/A ANNER OF DEATH	
NOT PREGNANT WITHIN	to the control of the		NATURAL	
	TIME OF INJURY PLACE OF INJU	IRY	INJURY AT WORK?	
LOCATION OF INJURY				
DESCRIBE HOW INJURY OCCURRE			IF TŘÁN, POPT, TION INJURY, SPECIFY	
YES DATE DECEASED? DA	ATE LAST SEEN ALIVE WAS MEDICAL EXAMINER OR DECEMBER 10, 2012 CORONER CONTACTED? YE	DATE PRONOUNCED	TIME OF DEATH 05:57 AM	
CERTIFIER PHYSICIAN			DATE CERTIFIED DECEMBER 27: 2012	
10 actives treated actively. Security constraints.	FPERSON COMPLETING CAUSE OF DEATH MILWAUKEE AVE., LIBERTYVILLE, ILLINOIS, 600	48	PHYSICIAN'S LICENSE NUMBER 036-093940	

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

Kevin J. Bowens

Village Of Libertyville, Local Registrar

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