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2017108186

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EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 06/19/2020 01:27 PM PG: 1 OF 4

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DOCUMENT COVERSHEET

TYPE OF DOCUMENT: AFFIDAVIT OF HEIRSHIP

GRANTOR: _____

GRANTEE: _____

DATE OF DOCUMENT: _____

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**KANE COUNTY CLERK REGISTRAR
GENEVA, ILLINOIS
MEDICAL EXAMINER/CORONER CERTIFICATE OF DEATH**

STATE FILE NUMBER 2019 0081200

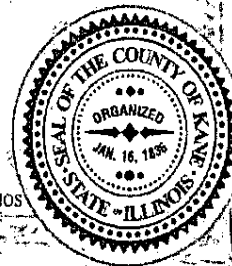
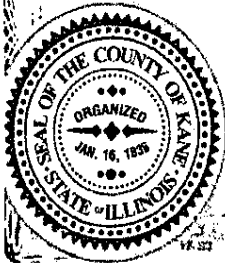
DATE ISSUED 10/28/2019

DECEDENT'S LEGAL NAME PARAMJIT SINGH MAHNGAR			SEX MALE	DATE OF DEATH OCTOBER 13, 2019	
COUNTY OF DEATH KANE	AGE AT LAST BIRTHDAY 77 YEARS	DATE OF BIRTH JULY 13, 1942			
CITY OR TOWN AURORA		HOSPITAL OR OTHER INSTITUTION NAME RUSH-GOPLEY MEDICAL CENTER			
PLACE OF DEATH INPATIENT					
BIRTHPLACE INDIA	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME BALJIT JHUTTI		EVER IN U.S. ARMED FORCES? NO
RESIDENCE 2402 GEORGETOWN CIRCLE		APT. NO.	CITY OR TOWN AURORA		INSIDE CITY LIMITS? YES
COUNTY WILL	STATE IL	ZIP CODE 60503	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION BACHITAR SINGH MAHNGAR		MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MOHINDER KAUR
INFORMANT'S NAME RUBY OTAL		RELATIONSHIP DAUGHTER	MAILING ADDRESS 740 WEIDNER ROAD APT 102, BUFFALO GROVE, IL, 60089		
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION AMERICAN CREMATION	LOCATION - CITY OR TOWN AND STATE OSWEGO, IL	DATE OF DISPOSITION OCTOBER 19, 2019	
FUNERAL HOME MCKEOWN-DUNN FUNERAL HOME LTD, 210 SOUTH MADISON STREET, OSWEGO, IL, 60543					
FUNERAL DIRECTOR'S NAME ERIC FARIAS DIAZ			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034017127		
LOCAL REGISTRAR'S NAME JOHN ANDREW CUNNINGHAM			DATE FILED WITH LOCAL REGISTRAR OCTOBER 28, 2019		
CAUSE OF DEATH PART I: SUBARACHNOID HEMORRHAGE					
IMMEDIATE CAUSE <small>(Final disease or condition resulting in death)</small>		Due to (or as a consequence of):		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	HOURS
b. MULTIPLE FRACTURES		Due to (or as a consequence of):			
c. FALL		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 VERTEBRAL ARTERY ANEURYSM, CAROTID ARTERY DISSECTION, PARKINSON'S DISEASE, DIABETES MELLITUS					
FEMALE PREGNANCY STATUS NOT APPLICABLE				WAS AN AUTOPSY PERFORMED? NO	
				WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
MANNER OF DEATH ACCIDENT					
DATE OF INJURY OCTOBER 12, 2019	TIME OF INJURY 12:26 PM	PLACE OF INJURY HOME		INJURY AT WORK? NO	
LOCATION OF INJURY 2402 GEORGETOWN CIRCLE, AURORA, IL, 60503					
DESCRIBE HOW INJURY OCCURRED FALL DOWN STAIRS				IF TRANSPORTATION INJURY, SPECIFY	
ATTEND THE DECEASED?	DATE LAST SEEN ALIVE	WAS MEDICAL EXAMINER OR CORONER CONTACTED?	DATE PRONOUNCED OCTOBER 13, 2019	TIME OF DEATH 07:58 AM	
CERTIFIER MEDICAL EXAMINER/CORONER				DATE CERTIFIED OCTOBER 28, 2019	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH L ROBERT RUSSELL, 719 S BATAVIA AVENUE, GENEVA, IL, 60134				PHYSICIAN'S LICENSE NUMBER	

300889

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.

John A. Cunningham
John A. Cunningham
Kane County Clerk and Registrar



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

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UNIT 47-3-714 TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN THE SIENNA CONDOMINIUM, AS DELINEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT NUMBER 97-205521, AS AMENDED FROM TIME TO TIME, IN THE NORTHWEST 1/4 AND THE NORTHEAST 1/4 OF SECTION 23, TOWNSHIP 42 NORTH, RANGE 11 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN 03-23-102-011-1153

64 CHERBOURG CT WHEELING IL 60090

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