



2027941016

Doc# 2027941016 Fee \$93.00

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

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 10/05/2020 12:35 PM PG: 1 OF 2

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.

PREPARED BY:

John Williams
10159 S. King Dr
Chicago, IL 60628

SURVIVING TENANT AFFIDAVIT

I, John V Williams the surviving tenant of the tenancy created by the deed with the document number: 12076180411 do hereby declare under oath that the tenant Shirley Ann Williams died on Jan 14, 2020 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

Lot 665 INF.HBartlett's Greater Chicago Subdivision Not being a subdivision of East 1/2 of the South West 1/4 of Section 10, Township 37 North Range 14 East of the Third Principal Meridian and All South East 1/4 of the section 10 Lying West of the and adjoining the Illinois Central Railroad Right of the Way in Cook County Illinois

PROPERTY IDENTIFICATION NUMBER (PIN):

2 5 - 1 0 - 4 0 7 - 0 3 8 - 0 0 0 0

COMMONLY KNOWN ADDRESS:

10159 S. King Drive
Chicago, IL 60628

NOTARY & AFFIANT SIGNATURE SECTION BELOW

Subscribed & Sworn to me by:

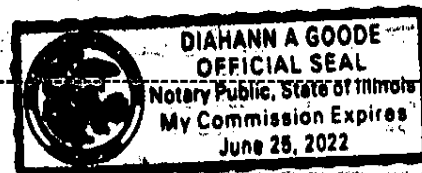
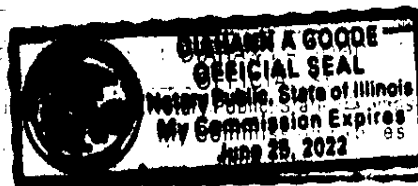
John V. Williams
Affiant Signature:

MAY 10, 2020

On the Following Date:

Diahann A Goode
May 10, 2020

AFFIX



SPS M SC E INTAV
Y I N Y Y N AV
D9-28-20

UNOFFICIAL COPY

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2020 0003527

DATE ISSUED 3/11/2020

DECEDENT'S LEGAL NAME SHIRLEY ANN WILLIAMS			SEX FEMALE	DATE OF DEATH JANUARY 14, 2020	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 76 YEARS		DATE OF BIRTH NOVEMBER 23, 1943	
CITY OR TOWN OAK LAWN			HOSPITAL OR OTHER INSTITUTION NAME ADVOCATE CHRIST MEDICAL CENTER		
PLACE OF DEATH INPATIENT					
BIRTHPLACE CHICAGO, IL		SOCIAL SECURITY NUMBER 325-36-6985		STATUS AT TIME OF DEATH UNKNOWN	
RESIDENCE 9437 SOUTH PERRY AVENUE			APT. NO.	CITY OR TOWN CHICAGO	
INSIDE CITY LIMITS? YES		SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME EVER IN U.S. ARMED FORCES? NO			
COUNTY COOK	STATE IL	ZIP CODE 60620	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION GUNZIE NELMS		MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION DORIS UNKNOWN
INFORMANT'S NAME ALLEN BRUCE DANIELS		RELATIONSHIP SON		MAILING ADDRESS 366 N SWEETZER AVENUE LOS ANGELES, CA 90048	
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION HEIGHTS CREMATORY		LOCATION - CITY OR TOWN AND STATE CHICAGO HEIGHTS, IL	
DATE OF DISPOSITION JANUARY 14, 2020		FUNERAL HOME CARING CREMATIONS 3517 NORTH PULASKI ROAD CHICAGO, IL 60641			
FUNERAL DIRECTOR'S NAME MILOS DJORDJEVIC			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016122		
LOCAL REGISTRAR'S NAME KAREN A YARBROUGH			DATE FILED WITH LOCAL REGISTRAR JANUARY 16, 2020		
CAUSE OF DEATH PART I ACUTE RESPIRATORY FAILURE					
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
		b. MULTIPLE MYELOMA			
		c.			
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 11:10 AM
CERTIFIER PHYSICIAN				DATE CERTIFIED JANUARY 15, 2020	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH SHEYLA ELIZABETH VILLENA MD, 4440 W 95TH ST, OAK LAWN, ILLINOIS, 60453				PHYSICIAN'S LICENSE NUMBER 036140799	

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.

Karen A. Yarbrough
 Cook County Clerk



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