

UNOFFICIAL COPY

DECEASED JOINT TENANCY AFFIDAVIT

Doc#: 2031928062 Fee: \$98.00
Edward M. Moody
Cook County Recorder of Deeds
Date: 11/16/2020 03:59 PM Pg: 1 of 2

HAROLD RABIN, being duly sworn that he resides at 3124 Nina Avenue in the Village of Wilmette, County of Cook, and State of Illinois.

That he was acquainted with NANCY RABIN, deceased, who at the time of his death, was one of the owners of the land in the City of Chicago, County of Cook, State of Illinois, described as:

LOT 6 IN ZARI'S FIRST ADDITION TO WILMETTE, A SUBDIVISION IN THE NORTH EAST QUARTER OF THE SOUTH EAST QUARTER OF SECTION 31, TOWNSHIP 42 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 05-31-408-100-0000

ADDRESS OF REAL ESTATE: 3124 NINA AVENUE, WILMETTE, IL 60091

PREPARED BY AND MAIL TO: BRIAN S. DENENBERG, DENKEWALTER & ANGELO, 1835 ROHLWING RD., SUITE D ROLLING MEADOWS, IL 60008

That the deceased died June 29, 2016, as evidenced by a certified copy of the death certificate of the deceased attached hereto.


That the deceased died:

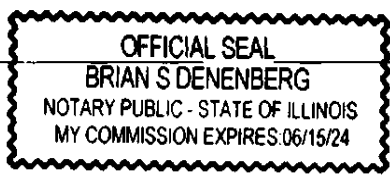
Leaving no Last Will and Testament.

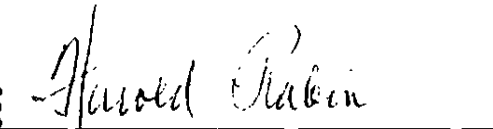
Leaving a Last Will and Testament a copy of which is attached hereto. The original of the unproven will should be filed with the Clerk of the Probate Division of the Circuit Court of _____ County, Illinois.

Leaving a Last Will and Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of Cook County, Illinois.

Subscribed and sworn to before me by the said HAROLD RABIN this 9th day of October, 2020.


Notary Public




Affiant's Signature

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CERTIFICATION OF DEATH RECORD

COOK COUNTY CLERK VITAL RECORDS CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2016 0053747

DATE ISSUED 7/12/2016

DECEASED'S LEGAL NAME NANCY ELINOR RABIN		SEX FEMALE	DATE OF DEATH JUNE 29, 2016	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 90 YEARS	DATE OF BIRTH JANUARY 05, 1926		
CITY OR TOWN SKOKIE		HOSPITAL OR OTHER INSTITUTION NAME SKOKIE HOSPITAL		
PLACE OF DEATH INPATIENT				
BIRTHPLACE CHICAGO IL	SOCIAL SECURITY NUMBER [REDACTED]	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S maiden name HAROLD RABIN	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 3124 NINA	APT. NO.	CITY OR TOWN WILMETTE		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60091	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION DAVID LERNER	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION EVA MELAMED
INFORMANT'S NAME HAROLD RABIN		RELATIONSHIP HUSBAND	MAILING ADDRESS 3124 NINA, WILMETTE, IL, 60091	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION SHALOM MEMORIAL PARK	LOCATION - CITY OR TOWN AND STATE ARLINGTON HEIGHTS, IL	DATE OF DISPOSITION JULY 01, 2016	
FUNERAL HOME SHALOM MEMORIAL FUNERAL HOME, 1700 W. RAND ROAD, ARLINGTON HEIGHTS, IL, 60004				
FUNERAL DIRECTOR'S NAME WILLIAM PEMBERTON			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015385	
LOCAL REGISTRAR'S NAME CATHERINE COUNARD			DATE FILED WITH LOCAL REGISTRAR JULY 11, 2016	
CAUSE OF DEATH	PART I	DIABETIC KETOACIDOSIS		
IMMEDIATE CAUSE <small>if a disease or condition resulting in death</small>	a	Due to (or as a consequence of)		
	b	Due to (or as a consequence of)		
	c	Due to (or as a consequence of)		
		Due to (or as a consequence of)		
PART II Enter other <i>significant conditions contributing to death</i> 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 01 47 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED JULY 07, 2016	
NAME ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH ROBERT J WOLF, 800 N WESTMORELAND, LAKE FOREST, ILLINOIS, 60045				PHYSICIAN'S LICENSE NUMBER 03608172



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.

David Orr
Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE