UNOFFICIAL CO



Doc# 2103516021 Fee \$88.00

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

KAREN A. YARBROUGH COOK COUNTY CLERK

DATE: 02/04/2021 12:13 PM PG: 1 OF 4

STATE OF ILLINOIS	) (		
COUNTY OF COOK	) ss		
	ESTATE OF Jaime Espino	Deceased	
And now on this	day of <u>June</u>	2, 2020, <u>Hermila Espino</u> ,	
after being first duly swom	under oath, testifies and deposes a	is fallows, to wit	
1. My name is	Hermila Espino, I	am over the age of twenty-one (21) years of	٠
age and, to my understandin	g, am otherwise competent to give	e testimony.	
2. I reside at _	519 Hillside Drive, Stro	<u>eamwood, Illinois 🕽</u>	. •
3. I am the	vife (state relationship	to deceased) and knew han in his lifetime.	5
4. <u>Jaime Espi</u>		commonly known as 623 Oriok Drive.	p <u>4</u>
		ity of <u>Hoffman Estates</u> , State of	S _
Illinois United State of Ame			M
5. The decedent wa	s married one (1) time withHo	ermila Espino .	5C
. 5a. <u>Three (2)</u> childreto be of majority age, unless of	ren were born to the decedent and otherwise noted:	Hermila Espino, as follows, and are assume	ed E
	_, , , _ , _		
<u> </u>	Richard Espino	<del></del>	
	Johnathan Espino		
AFOL	SIVED IN RAD AGO	NOTTIONOD CAR VII	

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5b. No persons were adopted by the decedent.
<b>6.</b> The parents of the decedent were: Fermin Espino and Esiquia Perez both said parents are now deceased.
7. The decedent died intestate.
8. That the total value of the estate of the deceased, including both real and personal property owned by the deceased. Either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of ten dollars (\$10.00) dollars.
9. 'The foregoing is based upon my own personal knowledge and belief, is true, and if called upon as a witness, I would competently and consistently testify thereto.
10. That the heirs at law to Jaime Espino, are Hermila Espino, his wife, Richard Espino, his son, and Johnathan Espino, his son
Ox
FURTHER AFFIANTS SAYETH NOT
Showler Engla
AFFIANT, Hermila Espino
SIGNED AND SWORN TO BEFORE ME ON
Hermila Espino
A A A A A A A A A A A A A A A A A A A
NOTARY PUBLIC
3 "OFFICIAL SEAL" 3

"OFFICIAL, SEAL"
LUIS C. MARTINEZ
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES 5/10/2023

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## **LEGAL DESCRIPTION**

LOT 2607 IN WOODLAND HEIGHTS UNIT 6 BEING A SUBDIVISION IN SECTIONS 23, 24, 25 AND 26, ALL IN TOWNSHIP 41 NORTH, RANGE 9, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 06-26-215-033-0000



2103516021 Page: 4 of 4

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

 	NU INCOME	 00.000			- 11	100	
1.0		100		3.24			

STATE FILE NUMBER 2020 00	34604			DATE ISSUED 4/22/202
DECEDENT'S LEGAL NAME JAIME ESPINO			sex MALE	DATE OF DEATH APRIL 16, 2020
COUNTY OF DEATH	AGE AT LAST B		DATE OF BIRTH APRIL 27, 1949	
CITY OR TOWN HOFFMAN ESTATES			OTHER INSTITUTION NAME XIUS MEDICAL CENTER	
PLACE OF DEATH				
BIRTHPLACE MEXICO	SOCIAL SECURITY NUMBER STAT	RRIED	HERMILA GARCIA	N PARTNER'S MAIDEN NAME EVER IN U.S. ARMED FORCES? NO
RESIDENCE 519 HILLSIDE DR		APT NO	CITY OR TOWN STREAMWOOD	INSIDE CITY LIMITS? YES
COOK IL	ZIP CODE PATHER/CO PAREN 30107 FERMIN ES	IT'S NAME PRIOR TO FIRST MARI SPINO	and the same of the same	PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION A PEREZ
INFORMANT'S NAME HERMICA ESPINO	RELATION		MAILING ADDRESS 519 HILLSDIE DR. S	TREAMWOOD, IL, 60107
METHOD OF DISPOSITION BURIAL	LAC OF DISPOSITION		LOCATION CITY OR TOWN	- 1 (1) (1) (2) (1) (1) (2) (2) (2) (2) (3) (3) (4) (4) (5) (5) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7
FUNERAL HOME COUNTRYSIDE FUNERA	L HOME - STWD, 64) CRE	ENMEADOWS BLVD,		
FUNERAL DIRECTOR'S NAME PHILOMENA TANCREDI			FUNERAL 0340	DIRECTOR'S ILLINOIS LICENSE NUMBER 5362
LOCAL REGISTRAR'S NAME KAREN A YARBROUGH			The control of the co	D WITH LOCAL REGISTRAR _ 21, 2020
CAUSE OF DEATH PARTIL	INTRACRANIAL BLEED			WEEP SATE
(Final disease or condition resulting in death)	D. PANCYTOPENIA APLASTIC A	Due to (or as a orisequence of NEMIA		AND DE
		Due to (or as a consequence of		APPI INTERV ONSET
PART II Enter other significant con-	ditions contributing to death but not	Due to (or as a consequence of resulting in the underlying cau		WAS AN AUTOPSY PERFORMED? NO
				WERE AUTOPSY FINDINGS USED TO: COMPLETE CAUSE OF DEATH? N/A
FEMALE PREGNANCY STATUS NOT APPLICABLE				MANNER OF DEATH VATURAL
DATE OF INJURY	TIME OF INJURY	PLACE OF INJUI	Y	INJURY AT WORK?
LOCATION OF INJURY				
DESCRIBE HOW INJURY OCCURRI	ED.			IF TRANS-C. (1) TION INJURY SPECIEY
ATTEND THE DECEASED?	DATE LAST SEEN ALIVE WAS	MEDICAL EXAMINER OR	DATE PRONOUNCE	
YES		ONER CONTACTED? NO		03:54 PM
PHYSICIAN	IF PERSON COMPLETING CAUSE OF			APRIL 21, 2020
	CREEK LN #111, HINSDAL			036117081



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

