

DOCUMENT PREPARED BY:

Jean M. Bogdaniec

6636 N Oshkosh Ave

Chicago IL 60631

MAIL SUBSEQUENT TAX BILLS TO:

Jean M. Bogdaniec

6636 N Oshkosh Ave

Chicago IL 60631



Doc# 2104028055 Fee \$88.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 02/09/2021 04:15 PM PG: 1 OF 4

SPECIAL NOTICE: THIS IS A NON-MANDATORY COURTESY FORM, AND IS NOT LEGAL ADVICE IN ANYWAY!

NOTICE OF DEATH AFFIDAVIT & ACCEPTANCE OF TRANSFER ON DEATH INSTRUMENT (TODI) DEED

Pursuant to §755 ILCS 27/15 Sec. 75. Notice of death affidavit, the undersigned beneficiary/beneficiaries, having been duly sworn and under oath, do state the following: That, Linda J. Bogdaniec died on October 13, 2020

as a resident of Cook County, Illinois, as owner of the Property Identification Number:

0 9 - 3 6 - 3 1 2 - 0 1 7 - 0 0 0 0

With the Legal Description of (attach exhibit if more room is needed):

See Legal Description attached.

And Common Address Of:

6636 N Oshkosh Ave, Chicago IL 60631

And Furthermore, the aforementioned owner (who is now deceased) recorded a Transfer on Death Instrument (TODI) on September 30, 2020 as Document Number: 2027434126 naming the following beneficiary/beneficiaries

as the successive owner(s) of the property referenced above with the stated percentage/share of said property:

NAME:	ADDRESS:	SHARE:
Jean M. Bogdaniec	6636 N Oshkosh Ave, Chicago IL 60631	100%

This form is compliments of:

KAREN A. YARBROUGH

COOK COUNTY CLERK

# UNOFFICIAL COPY

## COOK COUNTY CLERK NOTICE OF DEATH AFFIDAVIT & TRANSFER ON DEATH INSTRUMENT (TODI) DEED PAGE 2 OF 2 (COURTESY FORM)

In witness whereof, the undersigned beneficiaries hereby accept the transfer of residential real estate under the Transfer on Death Instrument, this 08 (day) of February (month), 2021 (year).

### Beneficiary Name & Signature Section:

Jean M. Bogdaniec

Print Beneficiary Name Above

Jean Bogdaniec  
Beneficiary Signature Above

Print Beneficiary Name Above

Beneficiary Signature Above

Print Beneficiary Name Above

Beneficiary Signature Above

Print Beneficiary Name Above

Beneficiary Signature Above

Print Beneficiary Name Above

Beneficiary Signature Above

Print Beneficiary Name Above

Beneficiary Signature Above

### Notary Public Section:

STATE OF ILLINOIS

COUNTY OF Cook } SS

I, the undersigned, a Notary Public in and for the State aforesaid, DO HEREBY CERTIFY THAT

Jean M. Bogdaniec

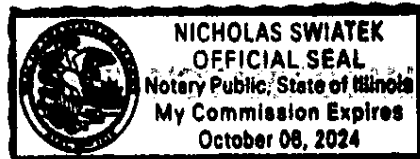
List the Name(s) of ALL Beneficiary(ies) who appeared personally before you ABOVE

personally known to me to be the same person or persons whose name or names are subscribed to the foregoing instrument, appeared before me this day in person and swore on oath to the above foregoing affidavit.

Signed and sworn to before me this 08 (day) of February (month), 2021 (year).

Nicholas Swiatek  
Signature of Notary Above

Nicholas Swiatek  
Print Name of Notary Above



HERE

This form is compliments of:

**KAREN A. YARBROUGH**  
COOK COUNTY RECORDER OF DEEDS

# UNOFFICIAL COPY

## LEGAL DESCRIPTION

LOT THREE (3) (EXCEPT THE NORTHERLY FIVE (5) FEET THEREOF) IN OLSEN'S RESUBDIVISION OF LOTS FOUR (4), FIVE (5), SIX (6), SEVEN (7) AND LOT THREE (3) (EXCEPT THE NORTHERLY FIVE (5) FEET THEREOF) IN BLOCK THIRTY (30) OF EDISON PARK IN SECTION THIRTY SIX (36), TOWNSHIP FORTY ONE (41) NORTH, RANGE TWELVE (12), EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY ILLINOIS.

Property of Cook County Clerk's Office

UNOFFICIAL COPY

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

STATE FILE NUMBER 2020 0095525

DATE ISSUED 10/20/2020

DECEDENT'S LEGAL NAME LINDA J BOGDANIEC		SEX FEMALE	DATE OF DEATH OCTOBER 13, 2020	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 72 YEARS	DATE OF BIRTH AUGUST 08, 1948		
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME 6636 NORTH OSHKOSH		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED]	STATUS AT TIME OF DEATH WIDOWED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 6636 NORTH OSHKOSH	APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60631	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION RICHARD KELLY	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MARIE WHEELER
INFORMANT'S NAME JEAN BOGDANIEC		RELATIONSHIP DAUGHTER	MAILING ADDRESS 6636 NORTH OSHKOSH, CHICAGO, IL 60631	
METHOD OF DISPOSITION CREMATION	PLACE OF DISPOSITION MORGAN CREMATION SERVICES	LOCATION - CITY OR TOWN AND STATE NORTHLAKE, IL	DATE OF DISPOSITION OCTOBER 20, 2020	
FUNERAL HOME M J SUERTH FUNERAL HOME, 6754 NORTH NORTHWEST HIGHWAY, CHICAGO, IL 60631				
FUNERAL DIRECTOR'S NAME DENNIS S KRAWZAK			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034011324	
LOCAL REGISTRAR'S NAME KAREN A YARBROUGH			DATE FILED WITH LOCAL REGISTRAR OCTOBER 19, 2020	
CAUSE OF DEATH	PART I	CHOLANGIOCARCINOMA		
IMMEDIATE CAUSE <small>(Final 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)		
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 11:10 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED OCTOBER 16, 2020	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR BOZENA THEODOROPOULOS MD, 2050 CLAIRE COURT, GLENVIEW, ILLINOIS, 60025			PHYSICIAN'S LICENSE NUMBER 036-098347	

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOT TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM

1499062



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*  
Karen A. Yarbrough  
Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE