# UNOFFICIAL COPY

Prepared by and Mail to:

NOTARY PUBLIC - STATE OF ILLINOIS

John D Kouel ATTORNEY	)oc# 2118757033 Fee \$88.00 :HSP FEE:s9.00 RPRF FEE: \$1.00
6413 W. 43RD. St.	AREN A. YARBROUGH
chicago II. 40638	OOK COUNTY CLERK
Ch (2010 II. 60638	IATE: 07/06/2021 12:18 PM PG: 1 OF 3
ľ	WILL STRONG EDET 12-18 PH PG: 1 OF 3
	The same of the sa
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STATE OF ILLI'(O'S ) COUNTY OF COOK )  DECEASED JOINT TENANCY SS.	AFFIDAVIT File Number: AU3042021-1 1/2
ROSEMARY J VAZQUEZ	File Number: 7030 (202(-) /2
being duly sworn states that	regides as COF4 VAL NIET COFFE
	resides at 6051 W. NELSON S In the City of
That SHE was acquainted with ROBERT VAZQUE one of the owners of the land in Cook County IL, rescribed as:	
SEE ATTACHED LEGAL	
That the deceased died <u>SEPTEMBER 8, 2017</u> of the deceased attached hereto.	, as evidenced by a certified copy of death certificate
That the deceased died: Leaving no Last Will & Testament.	
Leaving a Last Will & Testament a copy of which is attached hereto. T  Clerk of the Probate Division of the Circuit Court of Cook County, IL.	the original of the unproven will should be filed with the
Leaving a Last Will & Testament which was filed in the Unproven Will Cook County, IL, about	
That the total value of the estate of the deceased, including both real and pers or in joint tenancy at the time of the death of the deceased, does not exceed the	$\tau_{c}$
\$50,000.00 dollars.	e sum of
	· C
Subscribed and sworn to before me by the said	
ROSEMARY J. VAZQUEZ	
this 24 day of QCTOBER, A.D. 20 20	: /
Notary Public (Affiant	normany J. Vary
- · · · · · · · · · · · · · · · · · · ·	() 0 0) >
OFFICIAL SEAL	ν. <i>ν</i> Ο

#### CERTIFICATION OF DEATH RECORD

## COOK COUNTY CLERK VITAL RECORDS CHICAGO, ILLINOIS

# MEDICAL CERTIFICATE OF DEATH

STATE:FILE NUMBER 2017 007	72356			DATE ISSUED 9/12/2017
DECEDENT'S LEGAL NAME ROBERT VAZQUEZ			$-$ -all $\Omega_{i}$ -all $\Omega_{i}$	e OF DEATH EPTEMBER 08 2017
COUNTY OF DEATH		LAST BIRTHDAY. /EARS	DATE OF BIRTH MAY 22, 1953	
CITY OR TOWN CHICAGO		er ditt verset in 1946 eries i	OTHER INSTITUTION NAME IAN AMERICAN HOSPITAL	
PLACE OF DEATH INPATIENT			### ## 14# ## ###### <u>###</u>	
BIRTHPLACE CHICAGO IL	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH	SURVIVING SPOUSE/CIVIL UNION PARTNER'S I	ALIDEN NAME   EVER IN U.S. ARMED   FORCES? NO
RESIDENCE 6051 W NELSON		APT, NO	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES
COUNTY STA'E	T104 T T T T (0.04) 4.44	OPARENT'S NAME PRIOR TO FIRST MAI JEL VAZQUEZ	RRIAGE/CIVIL UNION MOTHER/CO-PARENT'S NAI ANGELA SAMAN	JE PRIOR TO FIRST MARRIAGE/CIVIL UNION
INFORMANTS NAME ROSEMARY VAZQUEZ	RE	LATIONSHIP. WIFE	MAILING ADDRESS 6051:W NELSON, CHICAGO,	L 60634
METHOD OF DISPOSITION BURIAL	PLA E OF DISE	OSITION LIVE CEMETERY	LOCATION CITY OR TOWN AND STATE CHICAGO, IL	DATE OF DISPOSITION SEPTEMBER 14, 2017
FUNERAL HOME CUMBERLAND CHAPELS	, 8300 W LAWRE 102	VE, NORRIDGE, IL, 6070	6	
FUNERAL DIRECTOR'S NAME ROBERT C SNIDER			FUNERAL DIRECTORS 034015105	ILLINOIS LICENSE NUMBER
LOCAL REGISTRAR'S NAME			DATE FILED WITH LOC SEPTEMBER 1	eries largeries filette fileti filetist
CAUSE OF DEATH PART I.  IMMEDIATE CAUSE 3.	CEREBRAL EDEMA			MEE.
(Final disease of condition resulting in death)	SUBARACHNOID HEM	Due to (or as a v m squince of DRRHAGE NON-TRAUM/ TIC	on .	RVAL BET
c		Oue to (or as a consequence of	ofi:	ONSE
		Due to (or as a consequence of	on .	
PART II: Enter other significant cond	itions contributing to death	but not resulting in the underlying cau	ise given in PART I	TOPSY PERFORMED? NO
				OPSY FINDINGS USED TO CAUSE OF DEATH? N/A
PRESENTED FROM THE PRESENTATION NOT APPLICABLE			NATUR	F DEATH
DATE OF INJURY	TIME OF I	NURY PLACE OF INJU	JRY	INJURY AT WORK?
LOCATION OF INJURY				
DESCRIBE HOW INJURY OCCURRED				TRANSP IR LATION INJURY, SPECIEY.
	ATE LAST SEEN ALIVE SEPTEMBER 08, 201	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 10.06 PM
CERTIFIER PHYSICIAN			<u> </u>	ATE CERTIFIED SEPTEMBER 12, 2017
NAME, ADDRESS AND ZIP CODE OF ALBELO, ADIANEZ, 1044	Carl Lead and Carlotter Carlot	a Aran aran aran aran kalar		PHYSICIAN'S LICENSE NUMBER 036-132443



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





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# **UNOFFICIAL COPY**

PROPERTY ADDRESS: 6051 W. NELSON ST. CHICAGO, IL 60634

P.I.N. 13-29-112-003-0000

### LEGAL DESCRIPTION:

LOT 26 IN BLOCK 4 IN 'AVARAS AND JOHNSON'S WESTFIELD MANOR, A SUBDIVISION OF THE FAST 1/2 OF THE NORTHEAST 1/4 OF THE NORTWEST 1/4 OF SECTION 29, TOWNSHIP 4/1 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS