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Doc#: 2121428298 Fee: \$98.00
Karen A. Yarbrough
Cook County Clerk
Date: 08/02/2021 03:20 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:

Jon P Younan

5700 N Lincoln Ave, Suite 217

Chicago, IL 60659

SURVIVING TENANT AFFIDAVIT

I, Chamma Marbina the surviving tenant of the tenancy created by the deed with the document number: 1002512281 do hereby declare under oath that the tenant Khanania Younan died on 9/7/2020 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

Parcel 1:

Unit 2A in the 2901-07 W Summerdale Condominium, as delineated on a survey of the following described real estate: Lots 453 and 453 and the West 6 feet of lot 455 in William H. Britigan's Budlong Woods Golf Club Addition No. 2, in section 12, Township 40 North, Range 13 East of the Third Principal Meridian, in Cook County, Illinois which survey is attached as Exhibit A to the Declaration of Condominium recorded as Document Number 0532134076 together with its Undivided percentage interest in the common elements, all in Cook County, Illinois.

Parcel 2:

Easement for the benefit of Parcel 1 as created by Deed from Chicago City Bank and Trust Company, a corporation of Illinois, as Trustees under the Trust Agreement dated July 10, 1968 and known as Trust Number 8122 to Adolph Teitz and Monika H. Teitz, his wife, dated June 1, 1972 and recorded July 5, 1972 as Document 21962767 for ingress and egress over the East 6.0 Feet of lot 452 in William Britigan's Golf Club Addition Number 2, aforesaid.

PROPERTY IDENTIFICATION NUMBER (PIN)

1 3 - 1 2 - 1 1 5 - 0 5 2 - 1 0 0 6

COMMONLY KNOWN ADDRESS:

2901 W W Summerdale Ave Unit 2A

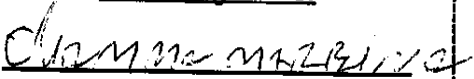
Chicago, IL 60625

NOTARY & AFFIANT SIGNATURE SECTION BELOW

Subscribed & Sworn to me by:

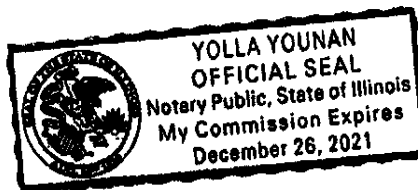
Yolla Younan 

Affiant Signature:



On the Following Date:

June 28, 2021



CERTIFICATION OF DEATH RECORD

UNOFFICIAL COPY

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

STATE FILE NUMBER 2020 0092023

DATE ISSUED 10/14/2020

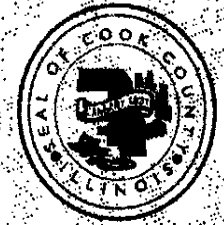
DECEDENT'S LEGAL NAME KHANANIA YOUNAN		SEX MALE	DATE OF DEATH SEPTEMBER 07, 2020	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 61 YEARS	DATE OF BIRTH JANUARY 01, 1959		
CITY OR TOWN SKOKIE		HOSPITAL OR OTHER INSTITUTION NAME SKOKIE HOSPITAL		
PLACE OF DEATH EMERGENCY ROOM / OUTPATIENT				
BIRTHPLACE SYRIA	SOCIAL SECURITY NUMBER 732-10-3647	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME CHAMMA MARBINA	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 2901 WEST SUMMERDALE AVENUE		APT. NO. 2A	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60625	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ZAYA YOUNAN	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION KHANNA YOUNAN
INFORMANT'S NAME CHAMMA MARBINA		RELATIONSHIP SPOUSE	MAILING ADDRESS 2901 WEST SUMMERDALE AVENUE, CHICAGO, IL, 60625	
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION BETHLEHEM NATIONAL CEMETERY (HERITAGE MEMORIAL CENTER)	LOCATION - CITY OR TOWN AND STATE CHICAGO, IL	DATE OF DISPOSITION SEPTEMBER 12, 2020
FUNERAL HOME VETERANS FUNERAL SERVICE, P.O. BOX 411, HINES, IL, 60141				
FUNERAL DIRECTOR'S NAME DAVID CARL PIMM			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016042	
LOCAL REGISTRAR'S NAME BRUCE A JONES			DATE FILED WITH LOCAL REGISTRAR OCTOBER 10, 2020	
CAUSE OF DEATH PART I. CARDIAC ARREST				
IMMEDIATE CAUSE (Final disease or condition resulting in death)				
a. [REDACTED] Due to (or as a consequence of):				
b. CORONARY ARTERY DISEASE				
c. [REDACTED] Due to (or as a consequence of):				
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.				
FEMALE PREGNANCY STATUS NOT APPLICABLE			WAS AN AUTOPSY PERFORMED? NO	
DATE OF INJURY			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
TIME OF INJURY			MANNER OF DEATH NATURAL	
PLACE OF INJURY			INJURY AT WORK?	
LOCATION OF INJURY			IF TRANSPORTATION INJURY, SPECIFY:	
DESCRIBE HOW INJURY OCCURRED:				
ATTEND THE DECEASED? NO	DATE LAST BEEN ALIVE UNKNOWN	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 08:30 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED OCTOBER 09, 2020	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DIMA RAMZY HANNA MD, 8301 SKOKIE BOULEVARD, SKOKIE, ILLINOIS, 60076			PHYSICIAN'S LICENSE NUMBER 036-119286	

1455307



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



THE WORD VOID APPEARS WHEN PHOTOCOPIED

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