

UNOFFICIAL COPY

DECEASED JOINT TENANCY AFFIDAVIT



Doc# 2206049000 Fee \$93.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 03/01/2022 09:16 AM PG: 1 OF 2

STEVEN D. STERN, being duly sworn, states that he resides at 1541 W. Nelson, in the City of Chicago, Illinois.

That he was acquainted with **MARILYN RATCHENSON, deceased**, who, at the time of her death, was one of the owners of the land in Chicago, Cook County, Illinois, described as:

LOT 63 IN SUNDMACHER AND GLADES SUBDIVISION OF BLOCKS 14 AND 15 IN THE SUBDIVISION OF THE SOUTHWEST 1/4 OF THE NORTHWEST 1/4 OF SECTION 29, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 14-29-112-012-0000

COMMONLY KNOWN AS: 1541 W. NELSON, CHICAGO, IL 60657

That the deceased died on February 26, 2019 as evidenced by a certified copy of death certificate of the deceased attached hereto.

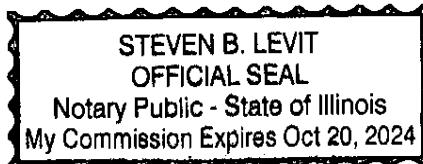
That the deceased died:

- Leaving no Last Will & Testament.
- Leaving a Last Will & 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 Cook County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of Cook County, Illinois about _____.

STEVEN D. STERN

Subscribed and sworn to before me this 9th day of February, 2022.

Notary Public



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

STATE FILE NUMBER 2019 0016947

DATE ISSUED 3/7/2019

DECEDENT'S LEGAL NAME MARILYN RUTH RATCHESON			SEX FEMALE	DATE OF DEATH FEBRUARY 26, 2019	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 68 YEARS	DATE OF BIRTH APRIL 18, 1950		
CITY OR TOWN CHICAGO			HOSPITAL OR OTHER INSTITUTION NAME HORIZON HOSPICE AND PALLIATIVE CARE		
PLACE OF DEATH HOSPICE FACILITY					
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER 331-44-4215	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME STEVEN STERN		EVER IN U.S. ARMED FORCES? NO
RESIDENCE 1541 W NELSON STREET		APT. NO.	CITY OR TOWN CHICAGO		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60657	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION NATHAN RATCHESON		MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION BEATRICE LEVY
INFORMANT'S NAME STEVEN STERN		RELATIONSHIP HUSBAND	MAILING ADDRESS 1541 W NELSON STREET, CHICAGO, IL, 60657		
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION FOREST CREMATORY	LOCATION - CITY OR TOWN AND STATE HOMewood, IL	DATE OF DISPOSITION MARCH 01, 2019	
FUNERAL HOME CREMATION SOCIETY OF ILLINOIS - LAKEVIEW, 736 WEST ADDISON STREET, CHICAGO, IL, 60613					
FUNERAL DIRECTOR'S NAME MARY ELIZABETH SULLIVAN			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016111		
LOCAL REGISTRAR'S NAME KAREN A YARBROUGH			DATE FILED WITH LOCAL REGISTRAR MARCH 1, 2019		
CAUSE OF DEATH PART I: METASTATIC BREAST CANCER					
IMMEDIATE CAUSE (Final disease or condition resulting in death):		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 significant conditions contributing to death , 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 PREGNANT WITHIN LAST YEAR				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 07:50 PM	
CERTIFIER PHYSICIAN				DATE CERTIFIED FEBRUARY 28, 2019	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH OLAYINKA AKINOLA, 710 S PAULINA, CHICAGO, ILLINOIS, 60612				PHYSICIAN'S LICENSE NUMBER 03610905999	

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM



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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE