

# UNOFFICIAL COPY



Doc# 2208022003 Fee \$88.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 03/21/2022 09:36 AM PG: 1 OF 3

Commitment Number: IL27729

This instrument prepared by: Ross M. Rosenberg, Esq., Rosenberg LPA LLC, Attorneys At Law, 101 South Reid Street, Suite 207, Sioux Falls, South Dakota 57103 (513) 247-9605.

## AFFIDAVIT OF TRANSFER TO SURVIVOR/SURVIVORSHIP AFFIDAVIT

STATE OF Illinois  
COUNTY OF Cook

Patricia A. Magee ("Affiant"), being first duly cautioned and sworn, and having personal knowledge of the facts and being competent to testify as to these matters, deposes and says as follows:

1. Dorothy J. Magee, formerly of Cook County, Illinois, died July 29, 2011, a legal resident of the State of Illinois.
2. A certified copy of the Death Certificate for Dorothy J. Magee is attached to this Affidavit.
3. The decedent and this Affiant were the grantees in a certain deed recorded at DATED: 9/10/1989 Instr. 181P: 382104102, of the Deed Records of Cook County, Illinois (the "Deed"), with respect to the property legally described as follows: Lot 8 in Stoltzner's Addition to Evergreen Estates, being a Subdivision of the North part of the South 1/2 of the Southwest 1/4 of Section 19, Township 41 North, Range 13, East of the Third Principal Meridian, lying East of Waukegan Road, according to Plat thereof registered in the Office of Titles of Cook County, Illinois. as Document Number 1460516. PIN: 10-19-316-008 Commonly Known As: 6945 W Cleveland Street, Niles, IL 60714



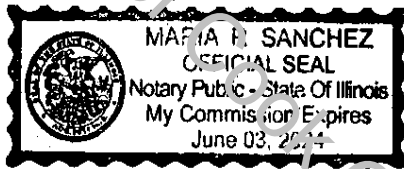
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- 4. In the Deed, the grantees designated are Dorothy J Magee and Patricia A. Magee, not in tenancy in common, but in joint tenancy
- 5. The address of Affiant is 6945 W Cleveland Street, Niles, IL 60714.
- 6. Affiant gives this Affidavit for the purpose of transferring the title to the foregoing property to Affiant on the records of the Recorder's Office in Cook County, Illinois.

Patricia A. Magee  
Patricia A. Magee

Sworn to before me and subscribed in my presence by Patricia A. Magee this February 28th, 2022.

Maria R. Sanchez  
Notary Public  
Maria R. Sanchez



Property of [Faded] County Clerk's Office

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

STATE FILE NUMBER 2011-0056967

DATE ISSUED 3/10/2022

DECEDENT'S LEGAL NAME DORTHY J MAGEE		SEX FEMALE	DATE OF DEATH JULY 29, 2011		
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 84 YEARS	DATE OF BIRTH JULY 17, 1927			
CITY OR TOWN PARK RIDGE	HOSPITAL OR OTHER INSTITUTION NAME ADVOCATE LUTHERAN GENERAL HOSPITAL				
PLACE OF DEATH INPATIENT					
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER 330-22-8770	STATUS AT TIME OF DEATH NEVER MARRIED/NEVER IN CIVIL UNION	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME	EVER IN U.S. ARMED FORCES? NO	
RESIDENCE 6945 W CLEVELAND	APT: NO	CITY OR TOWN NILES	INSIDE CITY LIMITS? YES		
COUNTY COOK	STATE IL	ZIP CODE 60714	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JAMES E MAGEE	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION FLORENCE FOX	
INFORMANT'S NAME PATRICIA MAGEE	RELATIONSHIP SISTER	MAILING ADDRESS 6945 W CLEVELAND, NILES, IL 60714			
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION MARYMILL CATHOLIC CEMETERY	LOCATION - CITY OR TOWN AND STATE NILES, IL	DATE OF DISPOSITION AUGUST 02, 2011		
FUNERAL HOME SMITH-CORCORAN FUNERAL HOME - CHICAGO, 6150 N CICERO AVE, CHICAGO, IL 60646					
FUNERAL DIRECTOR'S NAME ROBERT JAY SMITH JR		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034012032			
LOCAL REGISTRAR'S NAME DAVID ORR		DATE FILED WITH LOCAL REGISTRAR AUGUST 2, 2011			
CAUSE OF DEATH	PART I	ACUTE OR CHRONIC RENAL FAILURE		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a.	Due to (or as a consequence of)			UNKNOWN UNKNOWN
	b.	HYPERTENSION			YEARS YEARS
	c.	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 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? YES	DATE LAST SEEN ALIVE JULY 29, 2011	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 10:42 PM	
CERTIFIER PHYSICIAN			DATE CERTIFIED AUGUST 01, 2011		
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH GRANDINETTI DEBRA, 6322 N CICERO, CHICAGO, ILLINOIS, 60646			PHYSICIAN'S LICENSE NUMBER 036107728		

2116954



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**

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM