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SPECIAL NOTICE:

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2236440021

Doc# 2236440021 Fee \$88.00

HSP FEE: \$9.00 RPRF FEE: \$1.00

MAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 12/30/2022 12:44 PM PG: 1 OF 3

PREPARED BY:

Zuhair Nubani

77 W. Washington #1507

Chicago, IL 60602

SURVIVING TENANT AFFIDAVIT

I, Shirley Ganja the surviving tenant of the tenancy created by the deed with the document number: 0512618078 do hereby declare under oath that the tenant Edward Ganja died on August 4, 2010 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

See attached legal description

PROPERTY IDENTIFICATION NUMBER (PIN):

1 7 - 1 0 - 1 3 2 - 0 3 7 1 0 1 7

COMMONLY KNOWN ADDRESS:

405 N. Wabash #202

Chicago, IL 60611

NOTARY & AFFIANT SIGNATURE SECTION BELOW

Subscribed & Sworn to me by:

Shirley Ganja

Affiant Signature:

Shirley Ganja

On the Following Date:

08/05/2022

OFFICIAL SEAL
ZUHAIR NUBANI
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES: 12/03/23
AFFIX NOTARY SEAL IN THIS SECTION

Zuhair Nubani

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Exhibit "A" – Legal Description

PARCEL 1: UNIT 202 IN RIVER PLAZA CONDOMINIUM AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED REAL ESTATE: LOTS 3,5,8,15,16,17,19,20,22,31 TO 39 BOTH INCLUSIVE, 41 AND 44 TO 48 BOTH INCLUSIVE IN RIVER PLAZA RESUBDIVISION OF LAND, PROPERTY AND SPACE OF LOTS 1 TO 12 AND VACATED ALLEY IN BLOCK 5 IN KINZIE'S ADDITION TO CHICAGO IN THE NORTHWEST ¼ OF SECTION 10, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS WHICH SURVEY IS ATTACHED AS EXHIBIT 'B' TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT NUMBER 94758753 TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS.

PARCEL 2: EASEMENTS FOR THE BENEFIT OF PARCEL 1 FOR INGRESS, EGRESS, USE AND ENJOYMENT OF THE PROPERTY AS SET FORTH IN THE RIVER PLAZA DECLARATION OF COVENANTS, CONDITIONS, RESTRICTIONS AND EASEMENTS RECORDED AS DOCUMENT NUMBER 94758750.

Property of Cook County Clerk's Office

CERTIFICATION OF DEATH RECORD

UNOFFICIAL COPY

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2010 0056581


DATE ISSUED 10/12/2022

| | | | | |
|---|---|--|---|---|
| DECEDENT'S LEGAL NAME EDWARD GANJA | | SEX MALE | DATE OF DEATH AUGUST 04, 2010 | |
| COUNTY OF DEATH COOK | | AGE AT LAST BIRTHDAY 85 YEARS | DATE OF BIRTH MAY 12, 1925 | |
| CITY OR TOWN GLENVIEW | | HOSPITAL OR OTHER INSTITUTION NAME GLENBROOK HOSPITAL | | |
| PLACE OF DEATH INPATIENT | | | | |
| BIRTHPLACE IRAN | SOCIAL SECURITY NUMBER 159-32-0490 | STATUS AT TIME OF DEATH MARRIED | SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME SHIRLEY SOLEIMAN | EVER IN U.S. ARMED FORCES? NO |
| RESIDENCE 3506 GLENLAKE DRIVE | | APT. NO. | CITY OR TOWN GLENVIEW | INSIDE CITY LIMITS? YES |
| COUNTY COOK | STATE IL | ZIP CODE 60026 | FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ABRAHAM SOLKAH | MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ANNA JACOB |
| INFORMANT'S NAME SHIRLEY GANJA | | RELATIONSHIP WIFE | MAILING ADDRESS 3506 GLENLAKE DRIVE, GLENVIEW, IL, 60026 | |
| METHOD OF DISPOSITION BURIAL | | PLACE OF DISPOSITION MONTROSE CEMETERY CO. | LOCATION - CITY OR TOWN AND STATE CHICAGO, IL | DATE OF DISPOSITION AUGUST 09, 2010 |
| FUNERAL HOME N.H. SCOTT & HANEKAMP, 1240 WAUKEGAN ROAD, GLENVIEW, IL, 60025 | | | | |
| FUNERAL DIRECTOR'S NAME JON G. HAWES | | | FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014809 | |
| LOCAL REGISTRAR'S NAME DAVID ORR | | | DATE FILED WITH LOCAL REGISTRAR AUGUST 9, 2010 | |
| CAUSE OF DEATH PART I | | SEPTIC SHOCK | | APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH |
| IMMEDIATE CAUSE (Final disease or condition resulting in death) | | a | | |
| b | | PNEUMONIA | | |
| 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 AUGUST 04, 2010 | WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO | DATE PRONOUNCED | TIME OF DEATH 06:30 PM |
| CERTIFIER PHYSICIAN | | | DATE CERTIFIED AUGUST 05, 2010 | |
| NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH RAY, DANIEL, 2650 RIDGE ROAD, EVANSTON, ILLINOIS, 60201 | | | PHYSICIAN'S LICENSE NUMBER 036-070526 | |

2227609



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