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Karen A. Yarbrough
Cook County Clerk
Date: 01/18/2023 03:51 PM Pg: 1 of 3

MAIL TO:

Brennan Law Offices, Ltd.
155 N. Michigan, Suite 700
Chicago, Illinois 60601

PREPARED BY:

Brennan Law Offices, Ltd.
155 N. Michigan, Suite 700
Chicago, Illinois 60601

NOTICE OF DEATH AFFIDAVIT AND ACCEPTANCE OF TRANSFER OF DEATH INSTRUMENT

The undersigned beneficiary or beneficiaries, being duly sworn on oath, state as follows:

That BEN L. MODRELL, JR. (Name of Owner) died on October 21, 2022, a resident of Cook (County), Illinois (State), owning residential real estate legally described below:

THE NORTH 32 FEET OF LOT 12 IN BLOCK 2 IN WM. L. WALLEN'S EDGEWATER GOLF CLUB ADDITION TO ROGERS PARK, BEING A SUBDIVISION OF THE SOUTHEAST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 36, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

That the street address of the residential real estate is: 6529 N. Campbell Avenue, Chicago, IL 60645, and the Property Identification Number (PIN) is: 10-36-422-016-0000.

That the Transfer on Death Instrument is dated June 17, 2022, and recorded as Document No: 2218710077 in the Office of the Recorder for COOK County, Illinois.

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That the undersigned, whose names and addresses appear below, are all beneficiaries entitled to receive under the Transfer on Death Instrument:

Double click to edit

| <u>Name</u> | <u>Address</u> | <u>Share</u> |
|---|--|--------------|
| Daniel D. Bartlett and Brenda A. Bartlett, as Co-Trustees of THE DANIEL D. BARTLETT & BRENDA A. BARTLETT TRUST DATED 8/31/2016 | <u>711 Columbia Road</u> <u>Colorado Springs Co</u> <u>80904</u> | <u>100%</u> |

In witness whereof, the undersigned beneficiaries hereby accept the transfer of residential real estate under the Transfer on Death Instrument this 30 day of December, 2022.

Daniel D. Bartlett

DANIEL D. BARTLETT, as Co-Trustee of THE DANIEL D.
BARTLETT & BRENDA A. BARTLETT TRUST DATED 8/31/2016

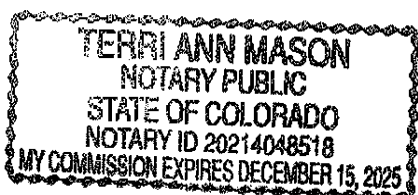
Brenda A. Bartlett

BRENDA A. BARTLETT, as Co-Trustee of THE DANIEL D.
BARTLETT & BRENDA A. BARTLETT TRUST DATED 8/31/2016

STATE OF COLORADO)
COUNTY OF El Paso) SS.

I, the undersigned, a Notary Public In and for said County, in the State aforesaid, DO HEREBY CERTIFY that DANIEL D. BARTLETT & BRENDA A. BARTLETT, as Co-Trustees of THE DANIEL D. BARTLETT & BRENDA A. BARTLETT TRUST DATED 8/31/2016, personally known or proven to me to be the same persons whose names are subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that they signed, sealed and delivered the said instrument as such Trustees for the uses and purposes therein set forth.

Given under my hand and official seal, this 30 day of December, 2022.



Terri Ann Mason
NOTARY PUBLIC

Exhibit A

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CERTIFICATE OF DEATH

STATE FILE NUMBER 1052022037206

| | | | | | | | | |
|--|---|--|---|---|---|--|--|--|
| DECEDENT'S LEGAL NAME BEN LEROY MODRELL JR. | | | | DATE OF DEATH OCTOBER 21, 2022 | | | | |
| SEX MALE | SOCIAL SECURITY NUMBER | AGE-Last Birthday (Years) 60 | UNDER 1 YEAR Months Days | | UNDER 1 DAY Hours Minutes | | DATE OF BIRTH (Mo/Day/Yr) JULY 03, 1962 | BIRTH PLACE (State or Foreign Country) KANSAS |
| IF DEATH OCCURRED IN HOSPITAL | | | | IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL NURSING HOME/LONG TERM CARE FACILITY | | | | |
| Facility Name (If not institution, give street & number) SUNNY VISTA LIVING CENTER | | | | CITY, TOWN OR LOCATION OF DEATH COLORADO SPRINGS | | COUNTY OF DEATH EL PASO | | |
| RESIDENCE - STREET AND NUMBER 2456 E CACHE LA POUDE STREET | | | | APT. NO. 804 | ZIP CODE 80909 | INSIDE CITY LIMITS YES | | |
| RESIDENCE STATE COLORADO | | | COUNTY EL PASO | | CITY OR TOWN COLORADO SPRINGS | | | |
| DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired) GLOBAL PROJECT MANAGER | | | | KIND OF BUSINESS/INDUSTRY BANK | | DECEDENT'S EDUCATION SOME COLLEGE CREDIT, BUT NO DEGREE | | |
| DECEDENT OF HISPANIC ORIGIN NO | | | | DECEDENT'S RACE White | | | | |
| EVER IN US ARMED FORCES NO | MARITAL STATUS AT TIME OF DEATH NEVER MARRIED | | SPOUSE/PARTNER NAME (If wife give name prior to first marriage) | | | | | |
| FATHER'S NAME BEN LEROY MODRELL SR. | | | | MOTHER'S NAME PRIOR TO FIRST MARRIAGE MARY ANN BIEBER | | | | |
| INFORMANT'S NAME BRENDA BARTLETT | | | | INFORMANT'S RELATIONSHIP TO DECEASED SIBLING | | | | |
| NAME OF FUNERAL HOME SHRINE OF REMEMBRANCE FUNERAL HOME & MAUSOLEUM | | | | CITY AND STATE OF FUNERAL HOME COLORADO SPRINGS COLORADO | | WAS CORONER NOTIFIED YES | | |
| METHOD OF DISPOSITION CREMATION | | PLACE OF DISPOSITION SHRINE OF REMEMBRANCE CEMETERY | | | LOCATION - CITY, COUNTY, STATE COLORADO SPRINGS EL PASO COLORADO | | | |
| INJURY AT WORK | IF TRANSPORTATION RELATED, SPECIFY | | DATE OF INJURY | | TIME OF INJURY | | | |
| PLACE OF INJURY | | | | | | | | |
| LOCATION OF INJURY (Street & Number, Apt. No., City or Town, County, State, Zip Code) | | | | | | | | |
| DESCRIBE HOW INJURY OCCURRED | | | | | | | | |
| WAS DECEDENT UNDER HOSPICE CARE YES | ACTUAL OR PRESUMED TIME OF DEATH APPROX 09:37 AM | | DATE PRONOUNCED DEAD (MO/DAY/YR) OCTOBER 21, 2022 | | TIME PRONOUNCED DEAD 09:37 AM | | | |
| MANNER OF DEATH NATURAL | | | WAS AN AUTOPSY PERFORMED NO | | IF AUTOPSY FINDINGS CONSIDERED IN DETERMINING THE CAUSE OF DEATH? | | | |
| CAUSE OF DEATH | | | | | | | | |
| PART I IMMEDIATE CAUSE (Final disease or condition resulting in death) | | Enter the chain of events - diseases, injuries, or complications that directly caused the death. | | | | Approximate interval: Onset to death | | |
| a. CEREBRAL VASCULAR ACCIDENT b. CHRONIC OBSTRUCTIVE AIRWAY DISEASE c. ATHEROSCLEROTIC HEART DISEASE d. | | | | | | YEAR | | |
| | | | | | | YEARS | | |
| | | | | | | YEARS | | |
| | | | | | | | | |
| PART II Enter other significant conditions contributing to death, but not resulting in the underlying cause given in PART I UNSPECIFIED GRAND MAL; SEIZURES | | | | | | | | |
| TITLE, NAME, ADDRESS, ZIP CODE AND COUNTY OF PHYSICIAN PAUL L BAKER MD 4270 LEHMAN DRIVE COLORADO SPRINGS CO 80918 | | | | DATE SIGNED OCTOBER 21, 2022 | | | | |
| TITLE, NAME, ADDRESS, ZIP CODE AND COUNTY OF CORONER SANDRA WILSON DEPUTY CORONER 2741 E LAS VEGAS STREET COLORADO SPRINGS COLORADO 80916 EL PASO | | | | DATE SIGNED OCTOBER 21, 2022 | | | | |
| DATE FILED BY REGISTRAR OCTOBER 24, 2022 | | | | | | | | |

DATE ISSUED OCTOBER 24, 2022

THIS IS A TRUE CERTIFICATION OF NAME AND FACTS AS RECORDED IN THIS OFFICE. Do not accept unless prepared on security paper with engraved border displaying the Colorado state seal and signature of the Registrar. PENALTY BY LAW, Section 25-2-118, Colorado Revised Statutes, 1982, if a person alters, uses, attempts to use or furnishes to another for deceptive use any vital statistics record. NOT VALID IF PHOTOCOPIED.

Alex Quintana
A. ALEX QUINTANA
STATE REGISTRAR

