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\*2304622014\*

Doc# 2304622014 Fee \$88.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 02/15/2023 10:36 AM PG: 1 OF 3

## MAIL SUBSEQUENT TAX BILLS TO:

Cydney Barnes

3608 S. Ellis Ave. Apt. 2N

Chicago, IL 60653

SPECIAL NOTICE: THIS IS A NON-MANDATORY COURTESY FORM, AND IS NOT LEGAL ADVICE IN ANYWAY!

## NOTICE OF DEATH AFFIDAVIT &amp; ACCEPTANCE OF TRANSFER ON DEATH INSTRUMENT (TODI) DEED

Pursuant to §755 ILCS 27/75, Sec. 75. Notice of death affidavit, the undersigned beneficiary/beneficiaries, having been duly sworn and under oath, do state the following: That, Claude J. Barnes died on April 2, 2022 as a resident of Cook County, Illinois, as owner of the Property Identification Number:

20 - 23 - 408 - 008 - 0000

With the Legal Description Of (attach exhibit if more room is needed):

Lot 12 and South 5 feet of lot 3 in block 1 in Pearce and Benjamins subdivisions of the North 1/4 of the South 1/2 of the North East 1/4 of South East 1/4 of Section 23, Township 38 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois

And Common Address Of:

6827 S. Harper Street, Chicago, IL 60637

And Furthermore, the aforementioned owner (who is now deceased) recorded a Transfer on Death Instrument (TODI) on 12/21/2020 as Document Number: 2101941044 naming the following beneficiary/beneficiaries

as the successive owner(s) of the property referenced above with the stated percentage/share of said property:

NAME:	ADDRESS:	SHARE:
Cydney N. Barnes	<del>6827 S. Harper Street</del> 3608 S. Ellis Ave., 2N Chgo. IL	50%

This form is  
compliments of:

KAREN A. YARBROUGH

COOK COUNTY CLERK

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**COOK COUNTY CLERK NOTICE OF DEATH AFFIDAVIT & TRANSFER ON DEATH INSTRUMENT (TODI) DEED**  
**PAGE 2 OF 2 (COURTESY FORM)**

In witness whereof, the undersigned beneficiaries hereby accept the transfer of residential real estate under the Transfer on Death Instrument, this 15 (day) of February (month), 2023 (year).

**Beneficiary Name & Signature Section:**

Cyndee Barnes  
 Print Beneficiary Name Above

Print Beneficiary Name Above

Cyndee Barnes  
 Beneficiary Signature Above

Beneficiary Signature Above

Print Beneficiary Name Above

Print Beneficiary Name Above

Beneficiary Signature Above

Beneficiary Signature Above

Print Beneficiary Name Above

Print Beneficiary Name Above

Beneficiary Signature Above

Beneficiary Signature Above

**Notary Public Section:**

STATE OF ILLINOIS }  
 COUNTY OF \_\_\_\_\_ } SS

I, the undersigned, a Notary Public in and for the State aforesaid, DO HEREBY CERTIFY THAT

CYNDEE BARNES  
 List the Name(s) of ALL Beneficiary(ies) who appeared personally before you ABOVE

personally known to me to be the same person or persons whose name or names are subscribed to the foregoing instrument, appeared before me this day in person and swore on oath to the above foregoing affidavit.

Signed and sworn to before me this 15 (day) of FEB (month), 2023 (year).

Anthony Keith Winston  
 Signature of Notary Above

ANTHONY KEITH WINSTON  
 Print Name of Notary Above



This form is  
 compliments of:

**KAREN A. YARBROUGH**  
 COOK COUNTY RECORDER OF DEEDS

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

STATE FILE NUMBER 2022 0036580

DATE ISSUED 4/20/2022

DECEDENT'S LEGAL NAME CLAUDE JOSEPH BARNES				SEX MALE	DATE OF DEATH APRIL 02, 2022
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 83 YEARS		DATE OF BIRTH FEBRUARY 06, 1939		
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME UNIVERSITY OF CHICAGO MEDICAL CENTER			
PLACE OF DEATH INPATIENT					
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER 353-30-1138	STATUS AT TIME OF DEATH DIVORCED FROM MARRIAGE		SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 6827 S HARPER AVE		APT. NO.	CITY OR TOWN CHICAGO		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60637	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION LEROI BROWN		MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ELIZABETH BARNES
INFORMANT'S NAME CYDNEY N BARNES		RELATIONSHIP DAUGHTER		MAILING ADDRESS 3608 S ELLIS AVE APT 2 N, CHICAGO, IL 60653	
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION FOREST CREMATORY		LOCATION - CITY OR TOWN AND STATE HOMEWOOD, IL	DATE OF DISPOSITION APRIL 15, 2022
FUNERAL HOME CREMATION SOCIETY OF ILLINOIS - HYDE PARK, 1344 EAST 55TH STREET, CHICAGO, IL 60615					
FUNERAL DIRECTOR'S NAME DIANE MOSELEY				FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 031009343	
LOCAL REGISTRAR'S NAME KAREN A YARBROUGH				DATE FILED WITH LOCAL REGISTRAR APRIL 15, 2022	
<b>CAUSE OF DEATH</b> PART I. ST-ELEVATION MYOCARDIAL INFARCTION					
<b>IMMEDIATE CAUSE</b> (Final disease or condition resulting in death)		a.		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
		b.			
		c.			
		Due to (or as a consequence of):			
Due to (or as a consequence of):					
PART II: Enter other <b>significant conditions contributing to death</b> 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 APRIL 02, 2022	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO		DATE PRONOUNCED	TIME OF DEATH 08:57 PM
CERTIFIER PHYSICIAN				DATE CERTIFIED APRIL 04, 2022	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH NADEEM BANDEALY, 5841 S MARYLAND AVE STE MC7082, CHICAGO, ILLINOIS, 60637				PHYSICIAN'S LICENSE NUMBER 125077275	

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM

THE WORD VOID APPEARS WHEN PHOTOCOPIED



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



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