

UNOFFICIAL COPY

**NOTICE OF DEATH AFFIDAVIT
AND ACCEPTANCE OF
TRANSFER ON DEATH
INSTRUMENT**

PREPARED BY AND RETURN TO:
Sandra M. Lopez
320 S. Canal, Suite 3300
Chicago, IL 60606

SEND SUBSEQUENT TAX BILL
TO:
Sandra Elena Lopez
4300 S Trumbull
Chicago, IL 60632



Doc# 2309422016 Fee \$88.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 04/04/2023 11:24 AM PG: 1 OF 4

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

That Gustavo Alfaro died on December 19, 2022, a resident of Cook County, Illinois owning residential real estate legally described below:

Legal Description – (Schedule of Real Estate Attached)

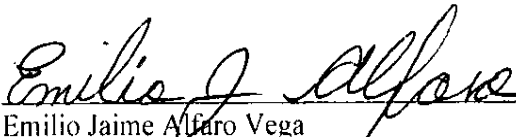
That the Transfer on Death Instrument is dated June 15, 2021 and recorded as Document Number #88148847 in the Office of the Recorder for Cook County Illinois.

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

<u>Name</u>	<u>Address</u>	<u>Share</u>
<u>Sandra Elena Lopez</u>	<u>4300 S. Trumbull, Chicago, IL 60632</u>	<u>50%</u>
<u>Emilio Jaime Alfaro Vega</u>	<u>3237 S 54th Court, Cicero, IL 60804</u>	<u>50%</u>

IN WITNESS WHEREOF, the undersigned beneficiary(ies) hereby accept the transfer of residential real estate under the Transfer on Death Instrument this 27th day of Feb, 2023.

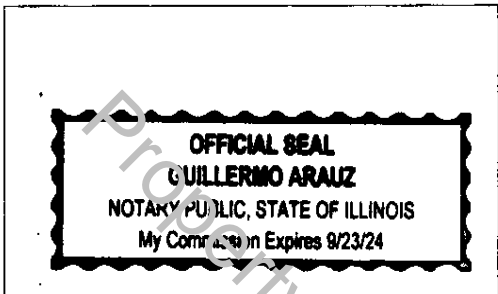

Sandra Elena Lopez


Emilio Jaime Alfaro Vega


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STATE OF ILLINOIS)
) SS
COUNTY OF COOK)

I, the undersigned, a Notary Public in and for the said County, in the State aforesaid, DO HEREBY CERTIFY THAT Sandra Elena Lopez and Emilio Jaime Alfaro Vega, personally known to me to be the same person(s) whose name(s) are subscribed to the foregoing instrument, appeared before me this day in person and swore on oath to the foregoing Affidavit.



SIGNED AND SWORN TO before me this 25th
day of Feb, A.D. 2023.



Notary Public

My commission expires: 9/23/2024

PREPARED BY AND
RETURN TO:

Sandra M. Lopez
320 S. Canal, Suite 3300
Chicago, IL 60606

Property of Cook County Clerk's Office

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LEGAL DESCRIPTION

**Lot 14 in Block 4 in Parkholme
Subdivision of Block 14 in Grant
Land Association Resubdivision of
Section 21, Township 39 North, Range
13, East of the Third Principal
Meridian, in Cook County, Illinois**

Permanent Index Number(s): 16-21-404-034-0000

Property Address: 1626 S 49th Court, Cicero, IL 60804

Property of Cook County Clerk's Office

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

STATE FILE NUMBER 2022 0114648

DATE ISSUED 12/29/2022

DECEDENT'S LEGAL NAME GUSTAVO RENE ALFARO VEGA			SEX MALE	DATE OF DEATH DECEMBER 19, 2022
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 76 YEARS	DATE OF BIRTH APRIL 18, 1946		
CITY OR TOWN PROVISO TWP		HOSPITAL OR OTHER INSTITUTION NAME FOSTER G. MC GAW HOSPITAL		
PLACE OF DEATH INPATIENT				
BIRTHPLACE MEXICO	SOCIAL SECURITY NUMBER 351-52-5154	STATUS AT TIME OF DEATH WIDOWED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 1626 SOUTH 49TH COURT		APT. NO.	CITY OR TOWN CICERO	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60804	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION GENARO ALFARO	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION RAQUEL VEGA
INFORMANT'S NAME SANDRA LOPEZ		RELATIONSHIP DAUGHTER	MAILING ADDRESS 1626 SOUTH 49TH COURT, CICERO, IL, 60804	
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION CARE CREMATION CENTER	LOCATION - CITY OR TOWN AND STATE ROMEVILLE, IL	DATE OF DISPOSITION DECEMBER 27, 2022
FUNERAL HOME CENTRAL CHAPEL INC, 6158 SOUTH CENTRAL AVENUE, CHICAGO, IL, 60638				
FUNERAL DIRECTOR'S NAME JENNIFER LYNN BERLONGIERI			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016171	
LOCAL REGISTRAR'S NAME ANTHONY WILLIAMS			DATE FILED WITH LOCAL REGISTRAR DECEMBER 27, 2022	
CAUSE OF DEATH				
PART I: ACUTE HYPOXIC RESPIRATORY FAILURE				
IMMEDIATE CAUSE (Final disease or condition resulting in death)				
a. _____ Due to (or as a consequence of)				
b. ACUTE ON CHRONIC HEART FAILURE WITH PRESERVED EJECTION FRACTION Due to (or as a consequence of)				
c. DIASTOLIC HEART FAILURE 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: ACUTE KIDNEY INJURY, CHRONIC KIDNEY INJURY, ATRIAL FIBRILLATION, HYPERTENSION, BRUCELLUSIS				
FEMALE PREGNANCY STATUS NOT APPLICABLE			WAS AN AUTOPSY PERFORMED? NO	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
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 DECEMBER 19, 2022	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 05:49 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED DECEMBER 20, 2022	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR. GABRIELLE MATIAS, 2160 S 1ST AVENUE, MAYWOOD, ILLINOIS, 60153			PHYSICIAN'S LICENSE NUMBER 125 075507	


APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

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

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