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RHSP FEE:\$18.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 07/10/2023 01:39 PM PG: 1 OF 3

Judy Hall
 1227 East 85th Place
 Chicago, IL 60619

MAIL SUBSEQUENT TAX BILLS TO:

Judy Hall
 1227 East 85th Place
 Chicago, IL 60619

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

NOTICE OF DEATH AFFIDAVIT & 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, Jerine W. Hall died on April 07, 2023

as a resident of COOK County, Illinois, as owner of the Property Identification Number:

20 - 35 - 423 - 026 - 0000

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

Lot One Hundred Seventy-Six (176) in J. E. Merrion's Marynook Addition, Being a Resubdivision of Part of the West Half (1/2) of the Southeast Quarter (1/4) and Part of the East Half (1/2) of the Southwest Quarter (1/4) of Section 35, Township 38 North, Range 14, East of the Third Principal Meridian

And Common Address Of:

1227 E. 85th Place Chicago, IL 60619

And Furthermore, the aforementioned owner (who is now deceased) recorded a Transfer on Death Instrument (TODI) on 03-02-2021 as Document Number: 2106140090 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:
Judy Hall	1227 E. 85 th Place, Chicago, IL 60619	100%

This form is compliments of:

KAREN A. YARBROUGH

COOK COUNTY CLERK

UNOFFICIAL COPY

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 10 (day) of July (month), 2023 (year).

Beneficiary Name & Signature Section:

Judy Hall
Print Beneficiary Name Above

Print Beneficiary Name Above

Judy Hall
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 COOK } SS

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

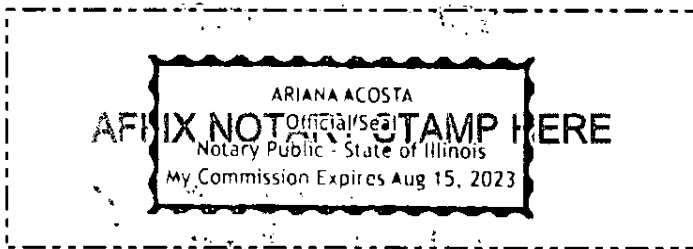
JUDY HALL
List the Name(s) of ALL Beneficiary(ies) who appeared personally before you ABOVE

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 10 (day) of JULY (month), 2023 (year).

Ariana Acosta
Signature of Notary Above

ARIANA ACOSTA
Print Name of Notary Above



This form is compliments of:

KAREN A. YARBROUGH
COOK COUNTY RECORDER OF DEEDS

UNOFFICIAL COPY

CERTIFICATION OF DEATH RECORD

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2023 0030241

DATE ISSUED 4/14/2023

DECEDENT'S LEGAL NAME JERINE W HALL		SEX FEMALE	DATE OF DEATH APRIL 07, 2023	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 101 YEARS	DATE OF BIRTH DECEMBER 15, 1921	
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME 1227 E 85TH PLACE		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE OKMULGEE, OK	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH WIDOWED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 1227 E 85TH PLACE	APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60619	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION WALTER W WILSON	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION LUTITIA BURTON
INFORMANT'S NAME JUDY HALL		RELATIONSHIP DAUGHTER	MAILING ADDRESS 1227 E 85TH PLACE CHICAGO, IL, 60619	
METHOD OF DISPOSITION CREMATION	PLACE OF DISPOSITION HEIGHTS CREMATORY	LOCATION - CITY OR TOWN AND STATE CHICAGO HEIGHTS, IL	DATE OF DISPOSITION APRIL 13, 2023	
FUNERAL HOME ELEMENTS CREMATION, LLC, 8695 S ARCHER WILLOW SPRINGS, IL, 60480				
FUNERAL DIRECTOR'S NAME DANIEL JOSEPH MCCARTHY			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015286	
LOCAL REGISTRAR'S NAME KAREN A YARBROUGH			DATE FILED WITH LOCAL REGISTRAR APRIL 13, 2023	
CAUSE OF DEATH PART I: ACUTE NON HEMORRHAGIC STROKE				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.	APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	WEEKS
		b.		WEEKS
		c.		WEEKS
Due to (or as a consequence of)				
PART II: Enter other <i>significant conditions contributing to death</i> , but not resulting in the underlying cause given in PART I. CEREBRAL VASCULAR DISEASE AND VASCULAR DEMENTIA				
			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? NO	DATE LAST SEEN ALIVE UNKNOWN	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 06:45 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED APRIL 12, 2023	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH KIM BATTLEMILLER, 2000 SPRINGER DRIVE, LOMBARD, IL, 60148				PHYSICIAN'S LICENSE NUMBER 036089483

2564445



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

