

**DECEASED JOINT
TENANCY AFFIDAVIT**

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Doc# 2322728012 Fee \$93.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 08/15/2023 11:47 AM PG: 1 OF 3

STATE OF ILLINOIS)
)
COUNTY OF COOK)

MARY A. BLUFORD,
being duly sworn, states that she
resides at 5725 West Maple Ave.,
Berkeley, IL 60163-1447.

That she was acquainted with
DAVID LEE BLUFORD, deceased,
who, at the time of his death, was
one of the owners of the land in Cook County, Illinois, commonly known as 5725 West Maple
Ave., Berkeley, IL 60163-1447, and further described as follows:

PIN # 15-07-401-061-0000

THE WEST 50 FEET OF THE EAST 58 FEET OF THE NORTH 120 FEET OF LOT 13 IN BLOCK 1 IN ROBERTSON AND
YOUNG'S "STRATFORD", A SUBDIVISION OF THE WEST 9.48 CHAINS OF THE SOUTHEAST 1/4 AND THE EAST 70
RODS OF THE SOUTHWEST 1/4 OF SECTION 7, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL
MERIDIAN, LYING NORTH OF THE RIGHT-OF-WAY OF THE CHICAGO AND GREAT WESTERN RAILROAD FORMERLY
KNOWN AS THE MINNESOTA AND NORTHWESTERN RAILROAD AND DEDICATION OF A PUBLIC STREET OR ROAD IN
SAID SOUTHWEST 1/4 OF SECTION 7, WEST OF AND ADJOINING SAID EAST 70 RODS OF SAID 1/4 SECTION, ALL IN
COOK COUNTY, ILLINOIS. TAX ID: 15-07-401-061-0000.

That the deceased died on December 11, 2022, as evidenced by a certified copy of the
death certificate of the deceased attached hereto.

That the deceased died leaving no Last Will and Testament.

That the total value of the estate of the deceased, including both real and personal
property owned by the deceased either individually or in joint tenancy at the time of the death of
the deceased, does not exceed the sum of \$ 450,000.00.

Mary A. Bluford

MARY A. BLUFORD

Subscribed and sworn to before me by the said MARY A. BLUFORD this 26TH day of
JULY, 2023.

Vinc Machroli

Notary Public



S Y
P 3
S Y-1
SC Y
INT EK

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Prepared by & Mail to:
Vincent C. Machroli
Law Office of Vincent C. Machroli, P.C.
High Point Plaza
4415 Harrison St., Suite #213
Hillside, IL 60162-1949
708- 449-7400
Machroli@sbcglobal.net

COOK COUNTY CLERK OFFICE
RECORDING DIVISION
118 N. CLARK ST. ROOM 120
CHICAGO, IL 60602-1387

Property of Cook County Clerk's Office

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CERTIFICATION OF DEATH RECORD

DUPAGE COUNTY HEALTH DEPARTMENT WHEATON, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2022 0110938

DATE ISSUED 12/30/2022

DECEDENT'S LEGAL NAME DAVID LEE BLUFORD		SEX MALE	DATE OF DEATH DECEMBER 11, 2022	
COUNTY OF DEATH DU PAGE	AGE AT LAST BIRTHDAY 63 YEARS	DATE OF BIRTH MARCH 03, 1959		
CITY OR TOWN ELMHURST	HOSPITAL OR OTHER INSTITUTION NAME ELMHURST MEMORIAL HOSPITAL-MAIN CAMPUS			
PLACE OF DEATH INPATIENT				
BIRTHPLACE BONITA, LA	SOCIAL SECURITY NUMBER 332-56-6446	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME MARY SMITH	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 5725 MAPLE AVE	APT. NO.	CITY OR TOWN BERKELEY	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60163	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JOHN BLUFORD	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION EMMA NICHOLS
INFORMANT'S NAME MARY BLUFORD	RELATIONSHIP WIFE	MAILING ADDRESS 5725 MAPLE AVE, BERKELEY, IL 60163		
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION OAK RIDGE CEMETERY	LOCATION - CITY OR TOWN AND STATE HILLSIDE, IL	DATE OF DISPOSITION DECEMBER 22, 2022	
FUNERAL HOME GOLDMAN PROFESSIONAL FUNERAL SERVICES, 418 S CICERO AVE, CHICAGO, IL, 60644				
FUNERAL DIRECTOR'S NAME YOLANDA GOLDMAN-MITCHELL			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016758	
LOCAL REGISTRAR'S NAME KAREN J AYALA			DATE FILED WITH LOCAL REGISTRAR DECEMBER 14, 2022	
CAUSE OF DEATH PART I: CARDIAC RESPIRATORY ARREST				APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
IMMEDIATE CAUSE (Final disease or condition resulting in death)				
a. Due to (or as a consequence of):				
b. CANCER				
Due to (or as a consequence of):				DAYS WEEKS
Due to (or as a consequence of):				MONTHS YEARS
PART II. Enter other <i>significant conditions contributing to death</i> 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? NO	DATE LAST SEEN ALIVE UNKNOWN	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 10:30 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED DECEMBER 13, 2022	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR SAAMER SIDDIQI, 155 E BRUSH HILL ROAD, ELMHURST, ILLINOIS, 60126			PHYSICIAN'S LICENSE NUMBER 036-136171	



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 J. Ayala
Local Registrar

Not valid without the embossed seal of the DuPage County Health Department.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE